

Iowa CASA Pre-Service Training

Iowa Child Advocacy Board

Module 5

Practicing the CASA Role: Diversity and Families

In-person



FACILITATOR NOTES Practicing the CASA Role Outcomes and Agenda

Equipment/Supplies

- Projector and screen
 - Power point
 - Easel, pad and markers
 - Slide: *Learning Outcomes*
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What you should know

- It is important to help everyone feel comfortable, so create a friendly atmosphere. People are better learners when they are relaxed. In addition, emphasize how important the session is for practicing some of the skills needed as an Advocate.
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What to say/do: Approx. 5 minutes

- **CUE SLIDE.** *Welcome* everyone back to today's session.
- **CUE SLIDE.** Share the *Learning Outcomes* for this session and the agenda.
- Outline the purpose is to help Advocates understand how the topical content of this module's material is applied to their role and the CASA report to the court.
- As a broad overview of Module 5, put in your own words some of the following which are also included in the facilitator notes on next page:
 - Module 4 was focused on children's issues in the child welfare system in general, understanding the CPP and child well-being domain, and how to advocate for the children's issues.
 - Module 5 is similar in that we are going to focus on understanding how we advocate using both the Advocate's personal understanding of what is best for kids and families, and deciphering the remaining CPP domains. The areas that outline the needs and services being provided by the State to the family to improve the parent and family functioning so that the child can be reunified with the child welfare system being removed from the family's life is the goal.
 - The reminder is the philosophy (based on both anecdotal and research) that suggests that all children do best if they can remain with or be returned to, their family. So, if we want children to be reunified successfully, we are obligated to address the parent and family system issues.
 - We spend all of Module 4 only focusing on the child well-being domain. This session, we must address all the remaining CPP domains.
- **CUE AGENDA SLIDE.** Ask if there are any questions about what you plan to accomplish in this session.
- Answer any questions the Advocates may have from participating in Module 4 and share how those questions will be further addressed during this session.
- Remind participants of ground rules and parking lot.

Learning Outcomes

The participants will:

- Describe how the child welfare system uses a family strength and resource lens approach.
- Identify and analyze their values and recognize the need to be objective.
- Recognize how major factors that impact family culture are risk factors for abuse and neglect of children.
- Develop a plan to gather information on a case.
- Practice outlining key features of family and individual strengths, case concerns, and recommendations for preliminary CASA Report to the Court.



Agenda

1. Welcome, Introductions and Learning Outcomes
2. Strengths of Children and Families Using Strength-Based Lens
3. Understanding Cultural Diversity
4. Identifying Values
5. Major Issues Impacting Cases
6. Successfully Gathering Information/Interviewing/Asking Questions
7. Other Advocate Responsibilities
8. Outline Permanency, Making Recommendations and Preparation for Module 6 Training
9. Wrap Up and Evaluation

FACILITATOR NOTES**Module 5: Introduction**

Equipment/Supplies

- Slide: *Introduction*
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What you should know

- This session incorporates concepts of using a strength-based, non-biased lens. Cultural humility and social and system issues are addressed within the context of the Advocate's role.
 - The Advocate will discuss and outline strengths, concerns and initial ideas for recommendations for their CASA Report, based on the Myers Case documents.
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What to say/do: Approx. 5 minutes

- **CUE SLIDE.** *Introduction* Explain that the purpose of today's session is to build upon the concepts discussed in Module 4 and practice the skills needed to be an Advocate. These concepts include the importance of permanency and child safety and well-being.
- As a reminder, in Module 2 we began our journey by learning how we initially begin the part of our Advocate role of "investigator". We are now months farther along in our Myers family case. As we continue to investigate issues and the State's, and our concerns, we are also monitoring how the case issues are progressing.
- Module 4 focused on children's issues and Module 5 focuses on broader family and parental issues and the initial practice of how we outline key issues in the CASA report.
- The overall framework of this session is Diversity in Families and how individual family culture and experiences impact the families we work with, our own lens, and objectivity.
- Both Module 4 and 5 set the groundwork for outlining key pieces of information that we will need to keep track of as we begin practicing report writing in Module 6. The CASA report is the culmination of all your hard work as a CASA up to that hearing you attend. It is the product that demonstrates to the court that you have upheld your responsibilities of being objective and looking at the big picture for what is in the child's best interest.
- The Myers Case Study will continue to be used during this session as we practice the role of Advocate.
- Remind the Advocate that as they continue this CASA learning journey, it is important to understand their own personal development path and become comfortable using the resources available (Coordinator/CASA Coach/In-service trainings) to build upon their base knowledge and skill set.

Introduction

This pre-service training continues to provide you the opportunity to acquire the skills, knowledge, and attitudes needed to be a CASA Advocate for children.

The purpose of today's session is to build upon the concepts discussed in Module 3 and 4 and skills practiced in Module 4. We will incorporate the importance of gaining a greater understanding of the family and child-related factors using a strength-based, non-biased lens. In addition, how cultural humility and system issues impact the advocacy role will be explored. As we practice our skills, we will demonstrate the four key roles of the CASA Advocate: to Investigate, Facilitate, Monitor, and Advocate.

During this session the Advocate will practice understanding the issues of the Case Study and how to use the CASA Report to the Court to advocate for the best interest of the child.

CASA Advocate pre-service training focuses on the importance of permanency and child safety and well-being. In order to effectively advocate for reunification, it is critical that we address the protective factors and risk factors that exists in families.

By working collaboratively with others, we can impact and improve children and families' protective factors such as building upon the strengths of resiliency and using the lens of family culture as a resource. Simultaneously, we can decrease risk factors such as parental substance use and interferences in parental capacities from mental health issues.



FACILITATOR NOTES**Module 5: Risk & Protective Factors**

Equipment/Supplies

- Slide: *Risk and Protective Factors*
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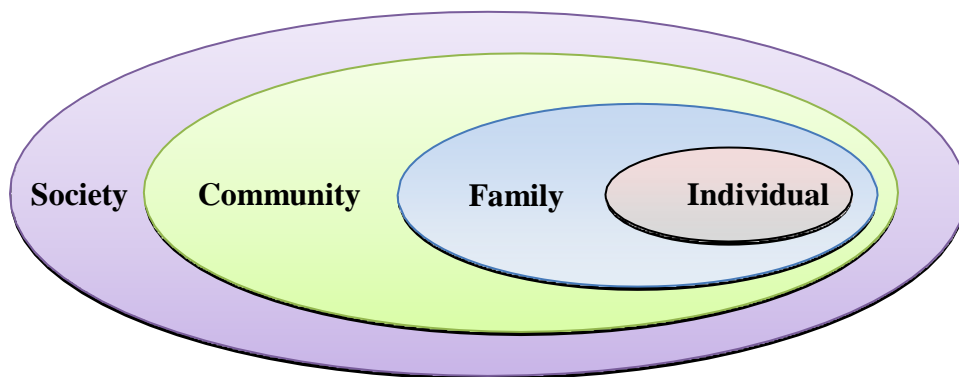
What to say/do: Approx. 5 minutes

- **CUE SLIDE.** *Risk and Protective Factors*
- Focusing on promoting protective factors is a more productive approach than reducing risk factors alone because:
 1. Protective factors are positive attributes that strengthen all families. A universal approach helps get needed support to families that may not meet the criteria for “at-risk” services, but who are dealing with stressors that could lead them to abuse or neglect.
 2. Focusing on protective factors, which are attributes that families themselves often want to build, helps us develop positive relationships with parents. Parents then feel more comfortable seeking out extra support if needed. This positive relationship is especially critical for parents who may be reluctant to disclose concerns or identify behaviors or circumstances that may place their families at risk.
 3. When we work with families to increase protective factors, we also help families build and draw on natural support networks within their family and community. These networks are critical to families’ long-term success.
- If strengths and supports are in place, it will impact how families will handle the next crisis.

Protective Factors

Most theories of child maltreatment recognize that the root causes can be organized into a framework of four principal systems: (1) the child, (2) the family, (3) the community, and (4) the society. Though children are not responsible for the abuse inflicted upon them, certain characteristics in these four systems have been found to increase the risk or potential for maltreatment.

Protective factors are conditions in families and communities that, when present, increase the health and well-being of children and families. They are attributes that serve as buffers, helping parents who might otherwise be at risk of abusing their children to find resources, supports, or coping strategies that allow them to parent effectively, even under stress. There is growing interest in understanding the complex ways in which these risk and protective factors interact, within the context of a child's family, community, and society, to affect both the incidence and consequences of abuse and neglect.



As risk and protective factors are often interrelated within families, the strengths-based intervention approach aims to address multiple risk and protective factors, rather than focus on a single factor. In a strengths-based intervention approach that focuses on building protective factors, parents themselves can identify and build on their own strengths to help enhance their parenting capacity and reduce the risk or potential for maltreatment.

We will take a closer look at the multiple risk and protective factors for families throughout this training session.

After you are sworn in as an Advocate, you will be offered in-service training opportunities that address community and societal protective and risk factors.

FACILITATOR NOTES**Module 5: Strength-Based Lens**

Equipment/Supplies

- Slide: Strengths-Based Lens
- Slides: (2) Videos - *Importance of Perception (2 min)* & *Power of Words (5 min)*
- Slide: *Identifying Family Strengths cartoon* **Activity Approximately 20 minutes**

What you should know

- Research shows that our perceptions influence how we interact with others, how other's perceive themselves, and how their behaviors can be altered based on our perceptions of them. It is significant to realize this when we are potentially impacting the lives of children.
 - Advocates will have their list in their Module 3 work. They have a blank page in their Module 5 after the cartoon picture to add any additional strengths we identify as a group.
-

What to say/do

CUE SLIDE. DHS and the court system are designed to use a *Strength-Based Lens*. It is more important than just using "feel good" language to do so. (*The reason is illustrated thru videos.*) This language is what is used throughout the service provider's work.

CUE PERCEPTION SLIDE. View **Video**. Discuss participants' thoughts on the video. Share the importance of how we perceive a person or family is critical to the work we do. If we perceive the family's successful reunification as hopeless, then we are not being objective.

CUE WORDS SLIDE. View **Video** which shows that even unspoken words are powerful. We need to be careful of our word choices both spoken and written. We will discuss later the importance of using objective language in our reports. It also demonstrates non-verbal's can be highly effective in communicating a message and an emotion. We will talk more about how that impacts our role.

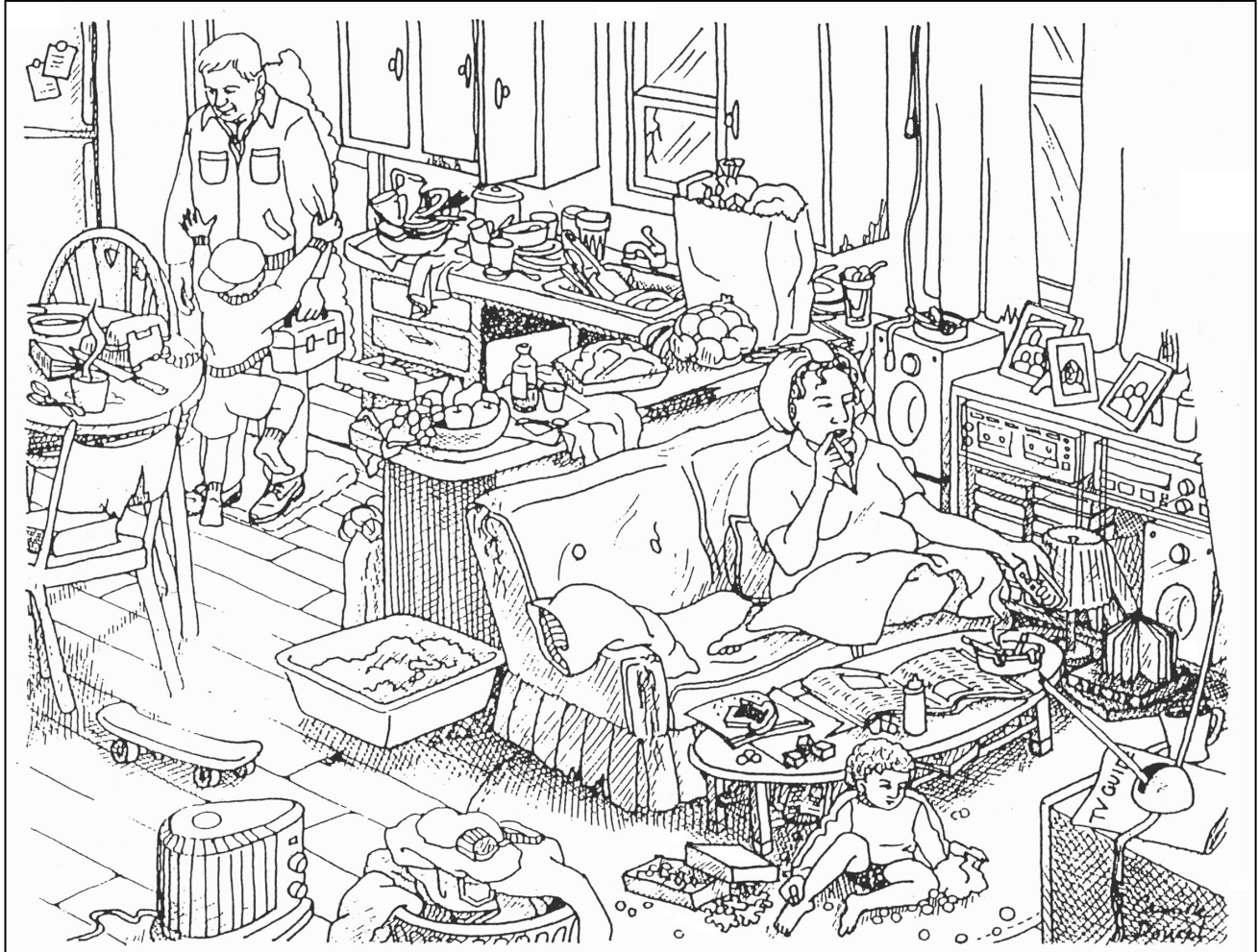
CUE SLIDE. *Identifying Family Strengths cartoon.*

ACTIVITY: Ask participants to bring out their cartoon and their list of identified strengths completed in Module 3 on page 50.

- What was their first impression of the picture? Discuss why we have those reactions: not our experience or lifestyle preference perhaps?
- Remind participants that they have additional space in Module 5 to add other ideas as we discuss the strengths. That is not required but provided in case they would like to do so.
- Discuss each "strength" that is shared and explain how that item is strength for many families in the system. Some Advocates are surprised as these things seem normal in their personal experiences.
 - Two adults (not necessarily does it need to be a parent) in the home
 - Employed parent (based on assumption of work shirt and lunch box)
 - Taking lunch to work (frugal, takes forethought for planning and effort as fast food may seem easier)
 - Parent-child bond: "Dad" response to child, pulling up, child going to hi for greeting
 - Books (research shows that even having books in the home improves literacy skills, even without being read to as a child by an adult)
 - Family photos (these are often lost in moves; it takes money and effort to print out the photos/buy the frame)
 - Cat litter box (Can you have a cat without a box? The State may make that an expectation to get the box if the cat is urinating in the house.)
 - Windows (exposure to natural sunlight especially important for mood disorders)

Understanding Child Welfare and Personal Perspectives

Activity: Cartoon from Module 3



Used with permission from the artist, Camille Doucet

FACILITATOR NOTES**Module 5: Strength-Based Lens**

Equipment/Supplies

- Slide: *Family Strengths* List
-

What to say/do: Approx. 5 minutes**What to say/do Continued**

- Continued list of strengths from picture
 - Clean clothing in a basket (not a carpeting of clothing)
 - Clothed children
 - Skateboard
 - Puzzle--age appropriate toys/activities
 - Music
 - Groceries
 - Fresh fruit (cost more than boxed/canned food)
 - Appropriate furniture, also blanket and pillows
 - Solid flooring
 - Electricity
 - Phone
 - Safe heater / or maybe it's an air purifier?
 - Dishes
 - Mom watching TV-have power, understands "me time" for stress relief, is around her children when doing the activity.
- **CUE SLIDE.** *Family Strengths* List. Point out any they miss if necessary.
- Recap that while identifying strengths in a family, as read in Module 3, it is important to be culturally sensitive.
- **Key Point** is that Advocates must be objective. If the Advocate has feelings or a history with an issue, then the feelings or experience becomes their "lens" with which they observe and gather information through. Removing the personal lens reduces bias and increases objectivity.

Additional ideas of family strengths observed in the picture:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
- 12.
- 13.
- 14.
- 15.



FACILITATOR NOTES: Module 5: How to use the Strength-Based Lens

Equipment/Supplies

- Slides: *Identifying Family Strengths Cartoon* and Slide: *Family Strengths List*
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What you should know

- The cartoon picture includes concerns. The key for Advocates is how not to be a “do-er” on the case, but remain within the scope of their role as observer and reporter when there are immediate concerns present.
 - Some Advocates may bring up how to handle emergencies. Walk through protocol if that issue is raised.
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What to say/do

- Explain how an Advocate, in the role of *Observing and Reporting*, addresses the identified concerns in the picture.
- Help the Advocates understand the goal with this as an OPTIONAL example of being able to state an observation: “I see a knife on the table” and have the parent self-identify: 1) the safety concern, that the little child could reach the knife and hurt themselves or others; 2) the solution to addressing the concern (they are their own expert, whether the solution is put it in the sink/drawer/etc. as it’s their decision how to handle it; and 3) the parent takes corrective action on their own without prompting. All of those things are strengths and can be included in a report that may demonstrate the progress a parent is making.
- The ability to identify a family’s strengths and the resources available to them that may assist them in being successful in meeting DHS and the court’s expectations, will be partially based on if “we” are using a glass half-full or glass half-empty lens. Or stated in other words, our work will be influenced if we can see the resources the family has available to them, or if we see their deficits.
- Advocates can practice using a strengths and resource lens by asking the questions:
 - How has this family solved problems in the past?
 - What court-ordered activities have family members completed?
 - How are family members coping with their present circumstances?

The Critical Importance of Using a Strength-Based Lens.

It is critical to look at a family through a “resource” lens, and focus on identifying the strengths. If you look through a “deficit” lens, the focus is on the problems. *All families have strengths and weaknesses.*

DHS and Court best practices call for using a strength-based lens.

Seeing the Strengths & Resources in Families

If I look through a RESOURCE lens, I am likely to:	If I look through a DEFICIT lens, I am likely to:
Look for positive aspects	Look for negative aspects
Empower families	Take control or rescue
Create options	Give ultimatums or advice
Listen	Tell
Focus on strengths	Focus on problems
Put the responsibility on the family	See the family as incapable
Acknowledge progress	Wait for the finished product
See the family as expert	See service providers as experts
See the family invested in change	Impose change or limits
Help identify resources	Expect inaction or failure
Avoid labeling	Label
Inspire with hope	Deflate the family's hope

Your ability to identify strengths in families depends partially on which lens—the resource lens or the deficit lens—you use in your work with families. The lens you choose will also influence your work with others involved in the case.

As an Advocate, the following questions can be asked when using the resource lens to assess a family:

- How has this family solved problems in the past?
- What court-ordered activities have family members completed?
- How are family members coping with their present circumstances?

FACILITATOR NOTES**Module 5: Protective Factors of Families**

Equipment/Supplies

- Slide: *Resources in Families*
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What you should know

- The definition of resource is more than money and community agency resources. It is all encompassing types such as skills, attitudes, beliefs, or people.
 - Become cognizant of any Advocate that identifies that a “spiritual resource” must look a certain way. Remind Advocates that we do not ask them to adopt others’ views, values, or lifestyles, but we must be accepting of other’s differences.
 - Also note anyone that shares that their spirituality is the premise for them feeling compelled to volunteer for the agency. This role is not the platform for evangelizing one’s personal beliefs.
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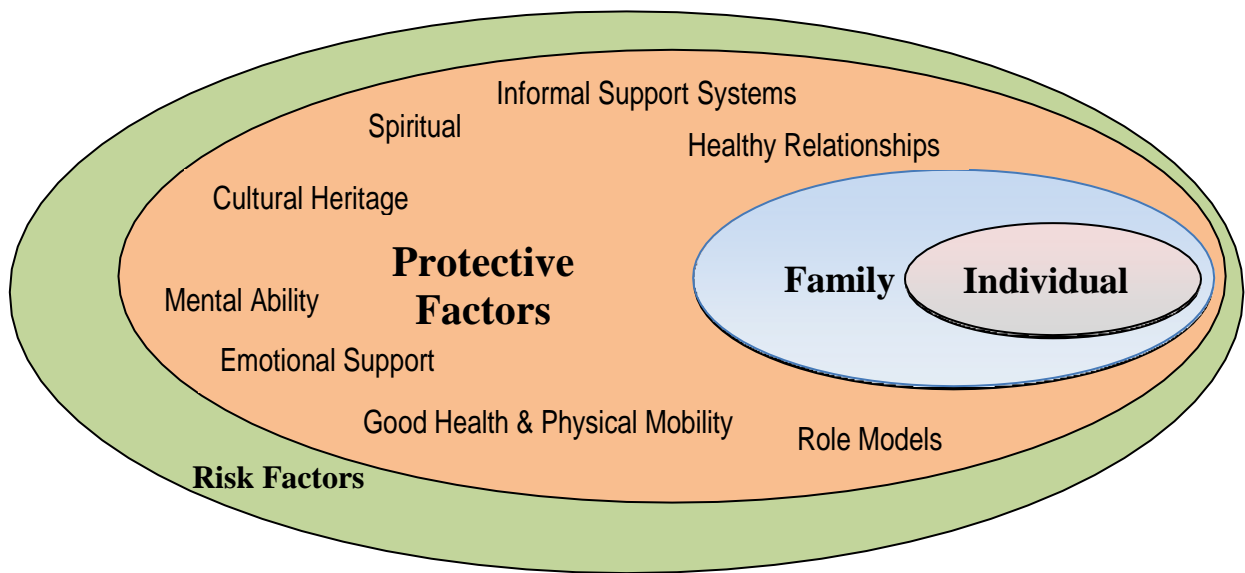
What to say/do

- **CUE SLIDE.** *Resources in Families*
- Explain that often people first think Material/Money when they hear the term resource.
- Resources that exist within a family (vs community resources) help the family be successful.
- Advocates will want to consider the other categories of resources that might be identified in a family and used as a springboard for meeting their expectations to have their children remain or returned to their care.
- Some of these types of resources can be thought of as “Human and Social Capital” as described in Module 3.
- **Mental ability:** being able to access and use information;
- **Emotional resources:** provide support and strength in difficult times;
 - Example: A “can do attitude”. When present, this resource allows an individual to not return to old thinking patterns or habits. It is harder for people to maintain changes if they do not have this.
 - It is ONE of the most important resources to MAINTAIN change.
- **Spiritual resources:** give purpose and meaning to people’s lives;
- **Good health and physical mobility:** allow for self-sufficiency;
 - What if I have a disability? Or a Disease? If not, that’s a resource
- **Cultural heritage:** provides context, values, and mores for living in the world;
- **Informal support systems:** networks, clubs, or kinship ties provide a safety net (e.g., money in tight times, child care for a sick child, job advice);
 - What do you do when you have a sick child, but you have to be at work?
- **Healthy relationships:** can nurture and support; and
- **Role models:** provide appropriate examples of, and practical advice on, achieving success;
 - Did he/she have a nurturing parent?

Protective Factors of Families

All people use different protective factors such as skills, attitudes, beliefs, and individual and external resources to deal with stress and problems.

Material goods are one kind of resource, but some individuals and cultures prize other resources above material wealth. As you read in Module 3 other types of resources beyond financial or community agency resources might include:



- **Mental ability** allows a person to access and use information.
- **Cultural heritage** provides context, values and morals for living in the world.
- **Good health and physical mobility** allow for self-sufficiency.
- **Spiritual resources** give purpose and meaning to people's lives.
- **Healthy relationships** nurture and support.
- **Emotional resources** provide support and strength in difficult times.
- **Informal support systems** provide a safety net (e.g., money in tight times, care for a sick child, job advice).
- **Role models** provide appropriate examples of and practical advice on achieving success.

FACILITATOR NOTES**Module 5: Protective Factors of Families
Continued**

Equipment/Supplies

- Slide: *Protective Factors*

What you should know

- This page is concluding the section that the definition of resource is more than money and community agency resources.
- When the system and the Advocate focuses on the protective factors that already exist within the family, the family is more engaged and supported.

What to say/do

- **CUE SLIDE.** *Protective Factors*
- As an Advocate: Using a strength-based approach means acknowledging the resources that exist within a family (including extended family) and tapping into them.
- While the Advocate may impact the financial status of a family through advocating for a referral to a program such as job training, it is far more likely that the Advocate's influence will be exerted to access other resources. For instance, you may identify a relative who can provide a temporary or permanent home for a child; you may help a parent reconnect with a past support system; or you may identify healthy adults who in the past were important to a child or family.

Those listed protective factors are conditions or attributes of individuals, families, communities, or the larger society that mitigate risk and promote healthy development and wellbeing. Put simply, they are the strengths that help to buffer and support families at risk. Risk factors refer to the stressful conditions, events, or circumstances (e.g., maternal depression, substance abuse, family violence, persistent poverty) that increase a family's chances for poor outcomes, including child abuse and neglect. Using a protective factors approach can be a positive way to engage families because it focuses on families' strengths, what they are doing right, and what resources they already have in their lives. Focusing exclusively on risk factors with families can leave families feeling stigmatized or unfairly judged.

As an Advocate:

Using a strength-based approach means acknowledging the resources that exist within a family (including extended family) and tapping into them.

While the Advocate may impact the financial status of a family through advocating for a referral to a program such as job training, it is far more likely that the Advocate's influence will be exerted to access other resources. For instance, you may identify a relative who can provide a temporary or permanent home for a child; you may help a parent reconnect with a past support system; or you may identify healthy adults who in the past were important to a child or family.

Why Advocate?

"Unless someone like you cares
a whole awful lot, Nothing is
going to get better. It's not."

- Dr. Seuss, *The Lorax*



FACILITATOR NOTES**Module 5: Strength of Cultural Diversity**

Equipment/Supplies

- Slides: *Strength of Diversity - Diversity Is...* - *Self-Awareness and Humility*
 - Slides: *The DNA Journey Video* -- *Objectivity*
-

What you should know

- Understanding cultural differences should also be used with a strength based lens. Family differences can be celebrated and perceived as a resource to help meet the system's goals and expectations so reunification is successful.
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What to say/do: Approx. 10 minutes

- **CUE SLIDE.** *Strength of Diversity.* Advocates will be working with people from a variety of backgrounds. Advocates need to understand how various cultures support safety, permanency and well-being of children. This section is designed to help the Advocate start thinking about issues of diversity that they may encounter in their role.
- Ask: What is diversity? Discuss the definition of culture: the shared values, traditions, norms, customs, arts, history, folklore, and institutions of a group of people who are unified by race, ethnicity, language, nationality, sexual orientation, and/or religion. Diversity in families in a broad context means difference in experiences, lifestyle, and values.
- **CUE SLIDE.** *Diversity is...* Ask "Within our role as an Advocate, what are important considerations?"
To be culturally sensitive, we need to be aware of our own identity/values and learn how to communicate cross-culturally and be open minded to differences. Discuss how everyone has probably all experienced the importance of accepting differences. Ex. could use: when you were 1st married or in a long term serious relationship and celebrated your 1st holiday together, did you find that your partner did things differently such as whether and when you exchange holiday gifts; or what kind of food you served for a particular holiday. Some may view this different as "wrong" and their traditions as "right" but usually we try to be open to our loved ones differences, We need to be just as open to differences in our roles as Advocates.
- **Key points:** 1) All Cultures are different, and there are variations within each culture. We can't presume that everyone in a particular culture or group thinks alike. 2) Culture is more than just race and language. It can be the culture of being an only child, the oldest child, being urban or rural, sexuality, marital status, or what area of the country one is from. 3) It is important to know our own identity/values and be able to communicate cross-culturally. 4) The bottom line is that it isn't about being right or wrong, it is just different. Reasonable people can see things differently.
- The terms "cultural competence" and "cultural responsiveness" may sound intimidating at first to Advocates. They may think, "How can I possibly learn and remember everything there is to know about every culture? Or, does this mean that I have to give up my values or compromise what I believe?"
- **CUE SLIDE.** *Self-Awareness and Humility- Key Points:* Being an Advocate does not mean they are expected to know everything about every culture, nor are they expected to give up their beliefs. Being culturally competent simply means the Advocate is able to work effectively with people from a variety of backgrounds. It is the true definition of tolerance, which is being respectful of other people's values, opinions, and way of life.
- *No one is ever fully culturally competent. Having cultural humility entails accepting that my way is not the only right way. Always asking, when do you need to understand more about a different cultural value or perspective can build cultural humility. Through humility comes objectivity.*
- **CUE SLIDE.** View **Video** *The DNA Journey (5 min)* about the importance of not judging others. & **CUE SLIDE.** *Objectivity* - Read statements on slide.

The Strength of Cultural Diversity

In child advocacy work, we encounter a great deal of cultural diversity. Culture can be defined as a system of values, beliefs, attitudes, traditions, and standards of behavior that govern the organization of people into social groups and regulate both individual and group behavior. It includes the differences or variety in people's identities or experiences, such as ethnicity, race, national origin, language, gender, religion, ability, sexual orientation, and socioeconomic class. Critical aspects of an advocacy role include understanding and accepting differences in families and individuals and how various cultures support child safety, permanency and well-being in different ways. Court Appointed Special Advocates and the child welfare system need to view cultural differences as a celebrated strength in families and be understood as a resource to be used while addressing the underlying issues of the case.

The United States is becoming increasingly multicultural. According to 2013 Census information, approximately 30% of the population currently belongs to a racial or ethnic minority group. The Census Bureau projects that by the year 2100, non-Hispanic whites will make up only 40% of the US population.

Understanding issues related to diversity and culturally competent child advocacy is critical to your work as an Advocate. It can enhance your ability to see things from new and different perspectives and to respond to each child's unique needs. Developing cultural competence, or the ability to work effectively with people from a broad range of backgrounds, experiences, and viewpoints, is a lifelong process. The Child Advocacy Board encourages our Advocates to understand their starting point and be open to learning more about the key issues related to cultural awareness and are encouraged to continue in their diversity exploration.

As you work through this information, keep in mind that family culture can mean a broad range of family experiences along with belonging in particular cultural groups.



FACILITATOR NOTES

Module 5: Personal Values

Equipment/Supplies

- Slides: *Values Video* (2 min) -- *Personal Values*

What you should know

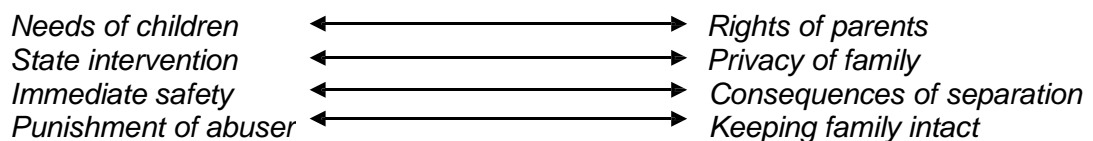
- This discussion is meant to create a dialogue about issues related to maintaining objectivity when faced with issues that may challenge an Advocates' personal value and belief system.
- It is important to reiterate that we do not ask Advocates to change their personal beliefs and values (adopt other values) but to be open minded and respectful that others involved in the system may have beliefs and attitudes different than their own. Reminder of the Adopt vs. Accept Differences.

What to say/do: Approx. 20 minutes

- One element of being objective and open minded about cultural differences is to understand and be accepting of values and belief differences.
- **CUE SLIDE.** View *Values Video*. It is a brief explanation of values and beliefs. (Disregard who made the video and their examples used.)
- After video share that exploring one's own values and personal beliefs and examining the values of others requires respect. The questions posed in this next discussion are intended to provide a respectful conversation on how we can maintain respect when interacting with someone that has different values and beliefs.

Discussion ACTIVITY:

- **CUE SLIDE.** *Personal Values*. Ask participants what they see as being some issues that they might come across while advocating within the child welfare system that could challenge some of their personal values. Ideas might include:
 - The value of honesty: Family members in the system might tell outright lies. How will the Advocate deal with that challenge of conflicting values?
 - The value of following medical advice/treatment protocol. The parent decides not to treat their child for ADD due to side effects.
 - Others might: use profanity; let children watch Rated R movies; have a messy disorganized house; let their children stay out late on school nights.
- When participants identify an issue and its underlying value that might be at odds, encourage discussing how they might adjust their attitude/behavior to continue to demonstrate respect of the differing value or action.
- Key issues to debrief:
 - Reminder that the Law outlines that the standard a state must use for becoming involved is MSLC and not personal values and any resulting behaviors.
 - The Advocates read about competing values in Module 2:

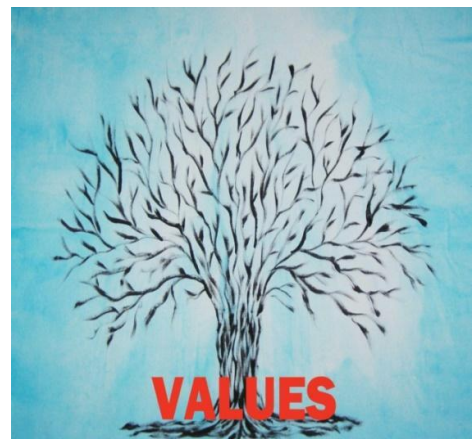


- Ask the group, When we have a personal bias, how might that impact where we fall on the continuum we completed in Module 2?
- Ask for any questions or concerns on how they may need to reconcile their personal beliefs and values with those espoused by the program.
- It is important to remember that the decisions families make are based on their values.
- It is also important to remember that decision making is impacted by trauma. It is not "what is wrong with you for making that decision" but what happened to you that led to that decision"

Understanding Cultural Influences on Personal Values

Exploring the meaning and place of values in your personal work on behalf of children can assist you in seeing the range of values that other people hold and the variety of reasons people have for their beliefs. It also increases your understanding that people can hold values very different from yours and be equally thoughtful and caring in their reasoning. Even when individuals appear to have similar values, they may actually have very different perspectives and reasons for having them. These beliefs and attitudes shape how we define ourselves.

As an Advocate: your work cannot be free of values. You model your own and your community's values every day through your actions (and inaction). Almost all interactions transmit values in some way—for instance, through how you dress, move, relate to others, and communicate. As an Advocate, you need to examine how values may affect your interactions with the children and families with whom you work. You need to acknowledge the plurality of values in your community and demonstrate respect for this diversity.



Values can be divided into two groups: those that are universal and those that are not. Universal values are shared by an overwhelming majority of the community. Laws often reflect these values, but they are not the same things. Exploring your values and how they are similar to, or different from, the values of others is part of the Advocate's growth in becoming objective and apply the mindset of cultural humility.

Each child and each family is made up of a combination of cultural, familial, and personal traits and values. In working with families, you need to learn about an individual's or family's culture and values. When in doubt, ask the people you are working with. It might feel awkward at first, but learning how to ask questions respectfully is a vital skill to develop as you grow in cultural competence.

Once people understand that you sincerely want to learn and be respectful, they are usually very generous with their help. Developing cultural competence is a lifelong process through which you'll make some mistakes, get to know some wonderful people in deeper ways, and become a more effective Advocate.

FACILITATOR NOTES**Module 5: Identifying Strengths as an Advocate**

Equipment/Supplies

- Handout #2: *Strengths in Families* Worksheet
 - *Myers Case Study* documents
 - Slide: *Case Study Strengths & Resources*
-

What you should know

- Remind participants that part of their role is identifying and reporting the strengths that exist in the family.
 - Remind participants that their report to the court should include the strengths that the Advocate identifies during the reporting period. These strengths might be the framework that other's build upon to meet the court's expectations so that the child can remain/return home.
 - Sometimes strengths are obvious and it's easy to identify what they are in a family or person. Other times Advocates must ask additional questions to determine what other strengths might be present.
 - Asking questions is an ongoing piece of the Advocate's role.
-

What to say/do:**ACTIVITY: Approximately 20 minutes total**

- **CUE SLIDE.** *Case Study Strengths & Resources*
 - Pass out the ***Strengths in Families Worksheet Handout.***
- This is not necessarily an entire list of family strengths but a starting point
- **Part One: 10 mins** In pairs: Ask participants to outline/discuss the following questions:
 - Which of the strengths listed on the worksheet are present in the Myers family? These are parental, child related, and family system types of strengths.
 - If particular strength is unknown in the Myers family, discuss together how might you gather information to find out?
- **Debrief 10 minutes** as a large group:
 - Ask for participants to share what strengths they identified as being present in the Myers family from the worksheet.
 - Advocates should routinely be thinking about how they might explore/investigate if other strengths are present. This can be seen as part of their role as investigator, but also within the role of monitor and facilitator.
 - This worksheet is one of the tools they can use in their advocacy toolbox when assigned to their actual case to structure their questions to assist in identifying strengths.

How do we apply a strength based lens to our Myers Case Study?



Activity: Identifying Strengths as an Advocate:

Read through the entries on the ***Strengths in Families Worksheet*** Handout. As you read, consider the strengths of the Myers family.

In pairs, discuss the following questions:

- Which of the strengths listed are present in the family?
- If you don't know whether or not a particular strength exists in this family, how might you gather information to find out?

FACILITATOR NOTES**Module 5: Case Study Strengths:
Culture and other identified strengths**

Equipment/Supplies

- Slide: *Case Study: Identifying Strengths for the CASA Report*
 - Handout #1: *Advocate Case Action Plan* Optional: Poster board/pens
-

What to say/do: Approx. 15 minutes

- Now that we have completed the section on the types of strengths that might be in a family, let's focus on listing all the strengths in the Myers family.
 - **CUE SLIDE.** *Identifying Strengths for the CASA Report*
- ACTIVITY: Identifying and Outlining Cultural and other Strengths in the Myers Case:**
Can be done as a large group activity using poster board and listing what is identified, or pair up participants to do their individual lists together, then debrief as a large group.
- Thinking about the Myers family, We are going to outline on our **Advocate Case Action Plan: Strengths Section** all the specific strengths for any person, the children and parents, or family as a whole. We will also consider strengths related to culture, lifestyles, support systems, and any others you might consider? *(If a group activity due to small participant numbers, remind them to write down the ideas as the facilitator notes them on the poster board.)* Specific instructions are:
 1. Using the Case Study documents as your understanding of the family, list the identified strengths on your **Advocate Action Plan** under **Strengths**.
 2. Make sure you add any strengths you identified from the Strengths Worksheet.
 3. Add any culture related strengths evident in the Myers case as well.
 - **Debrief** in large group: What strengths did you identify as being present for the Myers Case? Ensure Advocates understand a small step of progress towards the ultimate goal outlined is a strength.
 - ✓ Family wants to be together; children want visits with each other
 - ✓ Mom has basic understanding and knowledge of parenting skills and has met children's needs in the past
 - ✓ Mom motivated for reunification; verbalizes what she needs to do; expresses sincere desire to increase effective interaction with kids
 - ✓ Extended relatives are present in the children's lives and mom's
 - ✓ Mom has some brief history of periods of time of stability, short employment
 - ✓ Children have ability to communicate well with others, academically capable
 - ✓ Condition of home clean and appropriate during FSRP visits 7/06/06 report
 - ✓ If mom has experienced childhood trauma/high ACE score and is doing well
 - Reminder that FTDM meetings are also designed to outline strengths.
 - Cultural strength that might be identified: the Tribe has been involved with the family in the past so that connection has already been initially established.
 - See **Facilitator Resource: Cheat Sheet** for more complete list of strengths.
 - **Ask the group:** What action steps would you take to become more culturally competent? Does the Advocate need to learn more about Native American culture or African Americans?
 - As a large group discuss: How would looking only at strengths, or only at deficits, affect your recommendations for this family?
 - We will use this list of strengths when we practice writing our own Myers CASA report in Module 6.



Activity: Outlining Strengths in the Myers Case

Part Two: Identifying Strengths for the CASA report

Using the Case Study documents outline on your **Advocate Action Plan** under **Strengths** section all the identified strengths present for the Myers family.

- Include any strength identified from the worksheet, any resources within individuals or within the family, or any culture related strengths evident in the Myers case.

As a large group we will discuss:

- What strengths did you identify as being present for the Myers Case?
- How would looking only at strengths, or only at deficits, affect your recommendations for this family?

FACILITATOR NOTES**Module 5: Risk Factors for Families**

Equipment/Supplies

- Slide: *Risk Factors Impacting Families*
-

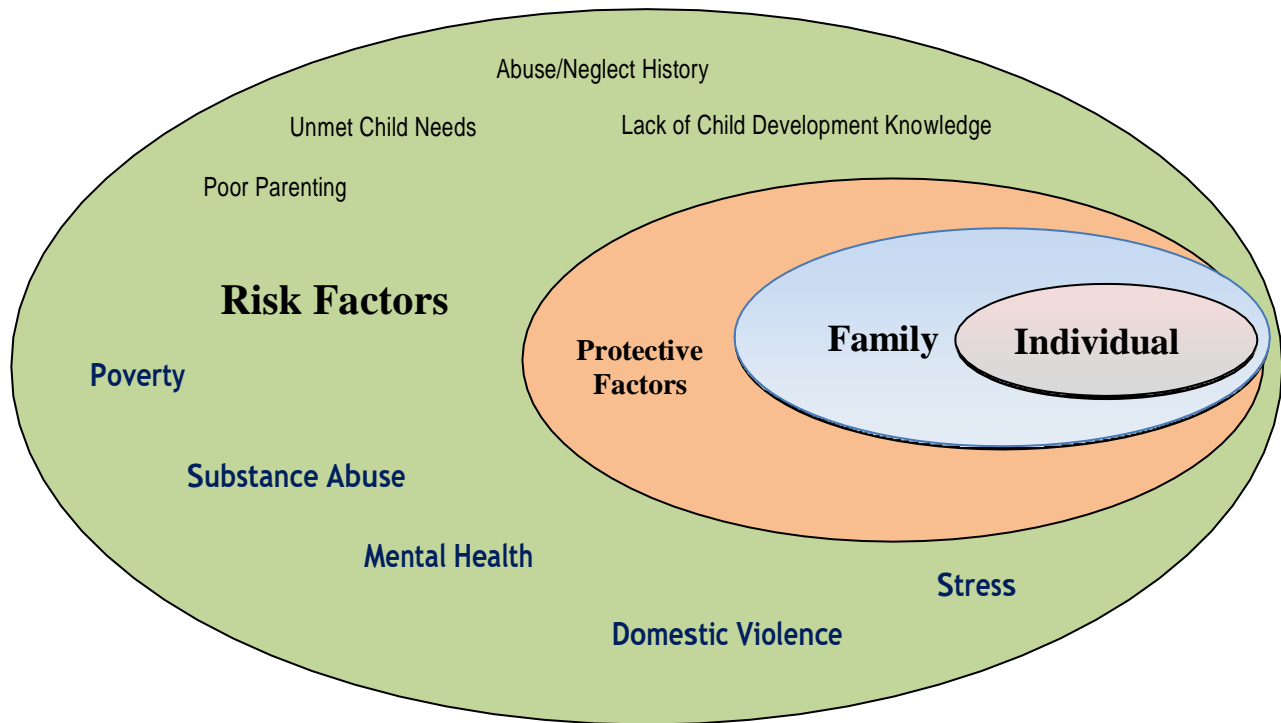
What you should know

- This is a transition explanation of focusing on both areas of strengths (or protective factors) and case concerns (risk factors).
-

What to say/do

- **CUE SLIDE.** *Risk Factors Impacting Families*
- There are multiple risk factors that impact the family culture, the children, the case plan, and the ability for progress to be made as the system works towards reunification.
- These risks include Poverty, Substance Abuse and other addictions, Mental Health Issues, Domestic Violence, and Stress.
- Woven throughout all of these issues is the concept of trauma. When someone has experienced toxic trauma, it can lead to a proportionally greater impact of any of those risks on the person and their family.
- Childhood trauma, if left unresolved, will impact later life. This impact is felt through their parenting and decision-making abilities.
- The Module 3 video of the impact of the stress of poverty on a family and parenting functioning is another risk factor that we will address further in this module.
- As you read through the material in Module 3, it's important to remember that our own personal experiences, stereotypes, biases, and assumptions about these issues will influence our ability to maintain objectivity about the case.
- We will take a closer look at these very challenging and profound issues that impact many of the cases that are involved in the child welfare system.

Risk Factors Impacting Families



Multiple risk factors can affect the family culture, the children, the case plan, and the family's ability to progress towards reunification. They include Poverty, Substance Abuse and other addictions, Mental Health Issues, Domestic Violence and Stress. As you read through the material in Module 3, it's important to understand that our own personal experiences, stereotypes, biases, and assumptions about these issues will influence our ability to maintain objectivity about the case. We will take a closer look at how these very challenging and profound factors affect many of the families involved in the child welfare system.

FACILITATOR NOTES**Module 5: Culture of Poverty**

Equipment/Supplies

- Slide: *Poverty and Slide: Culture of Poverty*

What you should know

- The federal poverty guideline is based on a formula developed in the 1960s. Many people argue that the formula is outdated and does not reflect current accurate poverty in the country. Regardless of the debate, it is the formula used to outline the poverty levels and is the basis for the statistics.
- National websites exist that track poverty and various impacts of poverty on quality of life domains. Updated statistics at: www.childrensdefense.org
www.aecf.org/kidscount

What to say/do Approx. 20 minutes

- **CUE SLIDE:** with *Poverty* guidelines. Share the federal poverty level. Socioeconomics can be a major stressor or factor that greatly defines how people live.
- Approximately 90% of cases have poverty as an underlying issue which makes it critical to be aware of how it impacts decision-making and values.
- **CUE SLIDE.** *Culture of Poverty*

ACTIVITY: Facilitate a discussion on all the changes that the Advocates would have to make/give up, in order to survive in poverty.

- Using the federal income amount on power point screen, ask participants to share ideas, list them on the poster board. Help Advocates understand how a change in one category may require a change in another = the “domino effect” Some examples:
 - Giving up your reliable vehicle for an older car with no car payment: increases repair bills and increases unreliability and the lack of sense of security on getting where a person needs to be, when they need to be there.
 - Move from your nice house to a house with bad windows, so your house is cold, so you only heat one room at night, and everyone sleeps in the same room. Where do you find less expensive housing? Often in areas that have higher crime rates. More substance abuse. Changes to environment which your children are exposed to. Community safety changes. What else changes? School districts and possible education of your children because of where you live.
 - Insurance: Home (no rental ins.); Auto (no auto ins.)—can you drive your kids now?
 - Expensive gifts for your kids—feel bad-kids compare themselves to others.
 - Good food—will be judged for junk food diets.
 - Savings/retirement—how does it influence your ability to feel secure about your future?
- What strengths would a person need to make this work?
 - People in poverty have to be creative and usually sacrifice many of the things that many others take for granted or assume are a necessary part of life to be full and satisfying.
 - Discuss how many people who lead busy, stressful lives use “payoffs” that help them get through the hard work (dinner out). Often it is those things that are given up if in poverty.
 - People in poverty are no less stressed than the financially successful. Different stress, yes, but not less. Yet they don’t have the ability to rationalize/justify their stress with the “goodies” in life.

Risk Factors Impacting Family

The Strengths from Surviving in Poverty?

Poverty can be a major factor that greatly defines how people live in the world. According to the Children's Defense Fund, at the end of 2013, more than 14.7 million US children (1:5) lived in poverty.

Activity: What Changes Would You Make?

Considering the federal poverty level for a single parent with two children in Iowa, assume you have just a bit over \$20,000 a year to live on. Imagine having to develop a monthly budget for \$1,680 that includes expenses for housing, utilities, food, clothing, transportation, entertainment, childcare, and medical expenses.

- What might a person need to give up, to survive with that level of income, meeting all of their children's needs?
- Consider how one change can influence and change other factors.
- Think about what strengths or abilities a person needs in order to live on \$20,000 a year.



FACILITATOR NOTES**Module 5: Key Facts of Kids and Poverty**

Equipment/Supplies

- Slide: *Key Facts About American Children*
-

What you should know

- National websites exists that track poverty and various impacts of poverty on quality of life domains. Updated statistics at: www.childrensdefense.org
www.aecf.org/kidscount
-

What to say/do Approx. 5 minutes

- **CUE SLIDE.** *Key Facts About American Children*
- Review the facts as outlined in participant material.
- Facts from National CASA training manual and The State of America's Children: Yearbook 2004, Children's Defense Fund, Boston: Beacon Press, 2004, and the Anna E. Casey Foundation's Kids Count Data Book, 2001 and 2003.
- National and Iowa poverty levels can be found online.

Key Facts about American Children

There are many myths and stereotypes associated with being poor. To separate myths from reality, it is important to look at what we do know about children and poverty in the United States.

1 in 2 . . .

Will live in a single-parent family at some point in childhood
Never completes a single year of college

1 in 3 . . .

Is born to unmarried parents
Will be poor at some point during childhood
Is behind a year or more in school

1 in 4 . . .

Lives with only one parent
Lives in a family where no parent has full-time, year-round employment

1 in 5 . . .

Is born poor
Is born to a mother who did not graduate from high school
Children under age 3 is considered poor right now

1 in 6 . . .

Is poor now
Is born to a mother who did not receive prenatal care in the first three months of pregnancy

1 in 7 . . .

Never graduates from high school

1 in 8 . . .

Does not have health insurance
Has an employed person in the family but is still poor
Lives in a family receiving food stamps

1 in 9 . . .

Is born to a teenage mother

1 in 13 . . .

Will be arrested at least once before age 17

FACILITATOR NOTES**Module 5: Why are more poor kids
In the system**

Equipment/Supplies

- Slide: *Why Are Poor Children More Likely to be in the System?*

What you should know

- More in depth training on poverty effects on families and how an Advocate can address poverty issues should be included as in-service training.

What to say/do: Approx. 5 minutes

- **CUE SLIDE.** *Why Are Poor Children More Likely to be in the System?*
- *Why people in poverty are likely to be over-represented in the child welfare system? It's a complicated issue.* Review reasons on slide.
 - Poverty is a stressor that can affect the family's functioning ability
 - Poverty, in itself, does not equal a failure to maintain the minimum sufficient level of care
 - Poor does not necessarily mean impoverished.
 - Understanding cultural differences around poverty can help manage bias about whether and how a poor family can provide MSLC.
- **ACTIVITY: Poverty vs. Neglect Approximately 10 minutes**
 - To help volunteers see that poverty does not equal neglect.
 - Discuss as a group: Complete the sentences in each of the following examples:
 - A family does not have a refrigerator. Is this is a child safety issue?
 - Yes, if
 - No, if
 - A family lives in a rental unit with holes in the floor. Is this a child safety issue?
 - Yes, if
 - No, if
 - A family lives in a car. Is this a child safety issue?
 - Yes, if
 - No, if
 - A family does not have a regular pediatrician. Is this a child safety issue?
 - Yes, if
 - No, if
- Help volunteers apply factors below to what they're learning about the distinction between poverty and abuse/neglect. This can be applied to the Myers family or be used as a general discussion.
 - What is the family's economic level?
 - Are cultural issues present that might cause a family not to ask for help?
 - Are there language or literacy barriers that prevent the family from accessing resources? Is the situation temporary or permanent?
 - What is the age of the child?
 - Are other risk factors (such as substance abuse) present?

Why Are Poor Children More Likely to Be in the System?

The majority of children you will encounter as an Advocate will be living at or below the poverty level. Developing a better understanding of the realities of poverty will assist you in being a better Advocate. Keep in mind, knowing people's socioeconomic status—like knowing their race, ethnicity, or other group membership—does not necessarily mean you can predict their attitudes or behavior. However, knowing their socioeconomic status does help you better understand their life experience, specifically some of the hardships they face.

While abuse and neglect occur in families at all socioeconomic levels, poor children are more likely to come to the attention of the child protection system. This happens for a variety of reasons. One reason is that middle- and upper-income families have access to many more resources within their families than poor people do. Even though family crisis, including abuse, happens at all income levels, it is poor people who often have to turn to the system for support. For people living in poverty, initial contact with “the system” is usually for reasons other than abuse. The contact may be about accessing medical care, food stamps, housing, etc. Once this contact is initiated, these families are communicating with many “mandated reporters,” increasing the likelihood that issues of child maltreatment and neglect will be investigated.

Poverty can cause great stress in families. Because of this stress, poverty itself is a major risk factor of abuse, which increases the likelihood of both immediate and lasting negative effects on children. However, poverty is not a causal agent of abuse. Most poor parents do not abuse their children.

Children who live in poverty are far more likely to have both reports of abuse and substantiated incidents of abuse in their lives. While poverty is not the causal agent of the abuse, it is a risk factor.

FACILITATOR NOTES**Module 5: Hidden Knowledge**

Equipment/Supplies

- Slide: Activity
 - Handout # 3: *Hidden Knowledge* Worksheet
-

What you should know

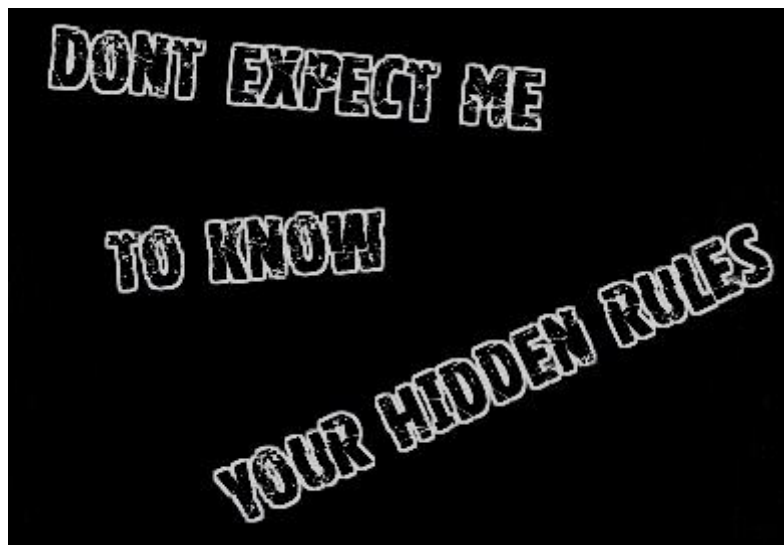
- There is no value judgment on what someone knows or does not know, as it is solely based on what you've experienced. Different experiences lead to different information.
-

What to say/do: Approx. 20 minutes total

- **CUE SLIDE.** Activity. If you have lived a life of surviving in poverty you may have different knowledge than if you learned how to function with moderate family income or in extreme wealth for example.
- **ACTIVITY: 10 mins. HANDOUT #3 Hidden Knowledge.** Direct participants to complete the handout. **Debrief:** Ask: How would someone learn those skills that they checked?
 - Usually they are acquired by “osmosis” - you just “know” from living your life. These are hidden knowledge or rules on how to be successful in that life since no one sat down and “taught” you that skill/knowledge.
 - Hidden Knowledge/rules are unspoken understandings between individuals, assumptions that everyone knows what they know.
 - Evaluations of “intelligence” or how a person approaches school or work may be expressions of hidden rules more than any true measure of ability. Many of the attitudes that children and families bring with them are an integral part of their life situation coupled with their culture and belief systems.
 - Middle-class solutions, typical of “the system,” should not necessarily be imposed when other appropriate and workable solutions can be found that better suit a particular family’s worldview. What one person views as a weakness or deficit may be considered a strength by another.
- Is your strength-based lens clouded by your particular worldview?
- Instruct Advocates to consider the list and what would be a personal strength to survive in poverty. This list of various skills/knowledge is a springboard for discussion.
- Now think if you were supposed to know how to do something, like enroll your child in extra-curricular activities so they would have a safe activity to do after school, and you never did that as a child, you may not know where to look or how to do it.
- What if by failing to follow through on this “expectation”, your child couldn’t come back to you, because you failed to meet this goal—but you don’t know how, and no one taught you how. Because “everyone” knows how to do this simple thing, and that’s how they learned that particular task/hidden rule.
- When thinking about the Myers family, consider what are the expectations for successful goal completion that might be made more difficult without hidden knowledge?
- **Discussion 10 minutes**
- Hidden Knowledge example might include: Does mom understand what is “appropriate caretakers”? Does she know how to look up individuals on the Child Abuse registry? Does she know how to gain employment that will meet her families’ needs? Does she know what “come prepared for visits” means? What are age “appropriate” activities? How are “appropriate” and “cooperative” measured?

Activity: Hidden Knowledge

- Read through the Hidden Knowledge handout and mark any item that you know as of today.
- As a group we will discuss how we learned that knowledge or skill.



As Advocates, we need to remember that the values that underlie the decisions made by families might be different than the values used by the child-welfare system in outlining case issues and behavioral goals.

What makes sense for one family may not make sense to "the system." Just because the line of thinking is different does not mean it's wrong.

The child welfare system becomes involved in a family's decision making when it has been determined that some decisions do not be meet a child's minimum sufficient level of care.

FACILITATOR NOTES**Module 5: Substance Use**

Equipment/Supplies

- Slide: *Major Factors that Impact Family Culture*
-

What you should know

- We have addressed how family dynamics such as cultural differences or living in poverty impact the culture of families' differences. Those are not always obvious in case plans as impacting the success or case concerns, but should be considered as important issues that impact the family. The "big three" issues of SA, MH, and DV are present and outlined in many cases and CPPs as being issues to be addressed.
 - It should not be presented that this is the entirety of the training on any of these types of issues. It is a starting point of knowledge from which to build upon. There will be opportunities to attend in-service trainings on these topics. We will provide ongoing training on areas that are specific to the case the Advocate has been assigned.
-

What to say/do: Approx. 5 minutes

- **CUE SLIDE.** *Major Factors that Impact Family Culture*
- Review with participants that cultural differences and poverty influence the dynamics in families. Other Major Factors that impact family culture were read about in Module 3.
- These types of issues are often found in our cases.
- It is important to have the basic understanding of these types of issues as it may influence the types of concerns outlined and resultant recommendations.
- Ask participants to raise their hand if they do not know anyone that has, or is struggling with, substance abuse or addiction of some kind. The point is most of us know someone; it's a prevalent issue and not just in the world of child welfare.
- Reiterate the point that everyone brings with them their own personal knowledge and life experiences as a starting point from which they will advocate. That starting point is just that, a beginning point to help understand the issue in light of this particular child, in this particular family, in looking at what is in their best interest.
- The Advocate's focus remains on what is best for this child. If what is best is for the child to remain with/return to their family (as all other options are second best in the child's eyes), then helping identify and remove barriers that the family is experiencing connected to these common issues will help advocate for the child to be successful in returning home as soon as possible.
- Remind volunteers how trauma, childhood or adult, can impact these Big 3.
- **What an Advocate Can Do Regarding Substance Abuse: Approx. 5 minutes**
 - Review the Red Box info.
 - Educate themselves about the power of addiction and about resources such as Alcoholics Anonymous, Narcotics Anonymous, Rational Recovery, Al-Anon, Alateen, and Nar-Anon.
 - Support those family members who are willing to deal with the substance abuse problem, even if the person with the substance dependence is not.
 - Address their own personal feelings about individuals they have known that have struggled with substance abuse.
 - Discuss with their Coordinator/CASA Coach their personal history so that they can assist the Advocate in remaining objective.

Substance Abuse

Key Points to Consider With Substance Abuse in the Family

In deciding whether a child can remain/return home to a family where substance abuse occurs, a number of factors should be weighed including:

- The parent's ability to function in a caregiver role.
- The child's health, development, and age.
- Parental history of alcohol, other drug abuse and substance abuse treatment.
- Safety of the home.
- Family supports.
- Available treatment resources.
- Treatment prognosis and/or length of sobriety.

A dilemma that often arises is the conflict between the legal mandate (and the child's need) for permanency (ASFA) and the long-term treatment (including inpatient treatment) that substance-abusing parents may need. If a parent is in treatment, consideration should be given to placing the child with the parent rather than in foster care. Although it is often the only available option, the child may feel punished when he/she is placed in foster care or away from the parent. The focus should be to support success in treatment, not to punish the parent by withholding the child.

As an Advocate: Consider the child's and parent's specific needs then make recommendations which might include:

- Thorough assessment with recommendations regarding treatment.
- Substance abuse/gambling treatment services (especially programs where the child can be with the parent, if appropriate).
- Home-based services to build family skills and safety measure in case of relapse.
- Services specific to children with parents who abuse substances.
- Relocation out of an environment where drug or alcohol use is pervasive.
- Financial assistance and childcare while parents are in treatment.
- Support services such as SSI (Supplemental Security Income), TANF (Temporary Assistance for Needy Families), food stamps, job training, and child support.
- When a child is in foster care, frequent visitation with parents in a homelike atmosphere or a natural setting such as a park.
- For substance abusing domestic violence victims, assistance for the parent seeking to flee a domestic violence perpetrator: obtaining a protective order, securing alternative housing, and taking other necessary steps as they are more likely to remain sober away from the abuser.

FACILITATOR NOTES**Module 5: Mental Health**

Equipment/Supplies

What you should know

- Anytime the facilitator can weave in how trauma impacts family and individual functioning, the more it will strengthen the message.
-

What to say/do: Approx. 5 minutes

- Review with Advocates the content in the participant material and red box.
- Mental health issues exist for both parents and children. If mental health issues are not identified as being present as a case issue, but the Advocate has concerns about the possibility, the Advocate would recommend that the individual seek a formal assessment completed by a professional.
- Note that symptoms for a diagnosis do not always look the same from one individual to the next---depression might not always be someone sad in bed, but might be other symptoms.
- Stereotypes of diagnosis still exists. This may impact accepting a diagnosis or seeking treatment.
- Some types of treatment for mental health issues may include group therapy. We need to be aware that there are cultural differences that also impact this issue, for example: therapy may not be an appropriate recommendation for certain cultures. As a generalization, Hispanic men and Native Americans may not be receptive to group therapy for cultural reasons.

Mental Health Issues

It is not your task to diagnose mental illness. However, it is important to be aware of warning signs or indicators that may affect the health or safety of the child, so that as an Advocate you can alert the child protective services caseworker about your concerns. How will you know mental illness when you see it? Your internal cues are your best initial indicators that something is “off” or “not right” about a person.

When you encounter resistance to a label, a diagnosis, or treatment, you will need to learn about whether ethnic or cultural considerations may be influencing that resistance. In some circumstances, the standards for research and definitions of health, illness, and treatment may not fully consider all ethnic and cultural factors involved and rely heavily on a white or middle-class perspective.

As an Advocate:

- You may be asked to assess whether reasonable efforts have been made for mental health treatment (culturally sensitive) and do the results allow the child to be safe in the parent’s care?
- If needed, identify the facts you have observed that cause you to believe a mental health concern exists and recommend a mental health assessment of a parent or child.
- You may request consultations with a parent’s or a child’s mental health care provider. Although the parent’s mental health care providers are ethically and legally required to maintain their client’s confidentiality, they may be willing—with their client’s permission—to talk with you about their perspective on the situation and any concerns you have. Your Coordinator/CASA Coach will be able to answer your questions about gaining access to this confidential information.

FACILITATOR NOTES**Module 5: Domestic Violence**

What you should know

- Domestic Violence is a complex issue so ensure Advocates understand that additional training will be provided if this issue is related to their assigned case.
- Lisa 911 story: Years after tape was first recorded, Kit Gruelle, DV survivor advocate, wanted to find out the rest of the story. Kit, working for the police department, was able to use those resources to track Lisa down, but, unfortunately, found her in her own abusive relationship. With Kit's help, Lisa was able to work her way out of it. It was around this time that Lisa found out about the tape. According to Field Education, Lisa vaguely remembers signing over rights to this 911 call audio recording to her, but she had no idea this tape would be "used to educate people about the effects of domestic violence on children." Even with years between her and the incident, Lisa is still not able to listen to the call and relive the events of that night. She does wonder why this particular recording has gotten so famous. She said she called the police hundreds of times when she was a young girl, and Child Protective Service (CPS) workers came out to her house at least twenty-three times. She and her siblings were never taken away. When she was younger, she didn't want to be taken away from her mother and was glad CPS never took her away, but, now that she can look back, she wishes they had.
- Lisa shares her story on The Children of Domestic Violence blog & starts it all off with, "I'm Lisa, a survivor with a future, because of my past." She talks about the difficulty of growing up and how life continually tried to drag her down, "I started to believe I wasn't worthy. I felt like a failure, destined for nothingness. I didn't believe I could change my life or my situation." With these feelings, she moved into a relationship just to feel something, but it didn't take long before the relationship turned abusive. She put up with it for years, but was eventually able to break away. She attributes a lot of that to "people who have entered my life during this transition. The ones who took the time to encourage and nurture my growth." Near the end of her story she says, "My journey isn't over – I still have many lessons to learn and obstacles to overcome. I'm just not afraid to take them on." I think it is important for people to remember. You aren't stuck where you are. You are simply facing an obstacle you need to overcome. With the help of people who care about you and your own belief that you have worth, you can survive.

What to say/do: Approx. 10 minutes

- There are specialists across Iowa that are instrumental in helping understand this topic. If there is domestic violence in a case the Advocate is assigned, then further training on the topic will be provided. What we share during the pre-service training is a beginning understanding of this complex issue.
- Review with Advocates the content in participant material and red box.
- **Debrief the Lisa recording. 5 minutes.** Discussion points include that Lisa was only 6 years old. Her response to this very traumatic crisis was calm and more adult than we'd typically expect. This demonstrates what? Likely this is not the first time it's occurred, she has become desensitized to it as a trauma response, she is parentified; she has been asked these types of questions before.
- Lisa Floyd grew up and became a speaker on the impact of DV on children. Her stepfather served one year in jail for this crime.

Domestic Violence

Children from violent homes are at a higher risk for abuse than other children. According to A Nation's Shame, a report compiled by the US Advisory Board on Child Abuse and Neglect, "Domestic violence is the single, major precursor to child abuse and neglect fatalities in the US."

Many professionals in the field of domestic violence believe that you cannot protect the child unless you also protect the primary nurturer/victim (usually the mother). As part of that perspective, they advocate for placement of the child with the mother regardless of other factors, saying that to do otherwise further victimizes the mother at the hands of the system. Others have the opposite view.

It may be that, with proper safeguards in place, the victim can make a safe home for the child while the threat from the batterer is reduced by absence, treatment, and/or legal penalties. It is also possible that the victim has shortcomings that prevent her from caring for her family at even a minimally sufficient level.

As an Advocate:

- Be both knowledgeable and concerned about domestic violence.
- Take into account the history and severity of family violence when making any recommendation for placement of a child.
- Determine the best interest of the child.
- You should assess the situation with a clear understanding of domestic violence dynamics, but in the end, you must make a recommendation based solely on the best interest of the child.
- Be knowledgeable about resources for children from violent homes and review the DHS case plan to ensure that services are provided for the children from violent homes.

FACILITATOR NOTES**Module 5: Domestic Violence**

What to say/do:

- Continue to review participant material.
- Whenever possible, tie back to trauma and end with that all of these issues, if present in a child's life, will add to their total ACEs score. And remember, the higher the ACEs total, the more likely to have life and health impacts in adulthood, increasing the need for resiliency skills to be added to the lives of children.

As an Advocate:Make recommendations specific to what the children need:

- Positive role models and supportive environments that will help them develop social skills and address feelings about the violence in a constructive manner.
- Help adopting alternative, nonviolent ways to address and resolve conflict (through specialized counseling programs, therapy, domestic violence victim support groups, youth mediation training, and relationships with supportive mentors).

Make recommendations specifically for parents.

- Try to ensure that domestic violence victims are treated fairly by the legal system and not further blamed in child abuse/neglect proceedings.
- Advocate in your community for things like housing, emergency shelters, legal procedures, and court advocates that increase the safety of mothers and children and support the autonomy of the adult victim.
- Encourage parenting classes for battered parents focused on empowering them to become more effective parents and teaching them how to help children cope with the consequences of witnessing domestic violence.
- Advocate for treatment programs for batterers followed by parenting classes focused on how to parent in a non-coercive, non-intrusive manner.
- Be alert to any signs that domestic violence has recurred or that contact between the batterer and the victim is ongoing, if that might compromise the child's safety. **The foremost issue is the safety of the child.**

It is critical to understand that it is difficult to recommend reunification with our personal biases and experiences influencing our advocacy. Simultaneously we are obligated to continue to use the Minimum Sufficient Level of Care (MSLC) standard when making recommendations regarding the best interest of the child and permanency.

FACILITATOR NOTES**Module 5: Case Study Review****Equipment/Supplies**

- Myers Case Study Documents Handout #1: *Advocate Case Action Plan*
- Slide: *Case Study Review of Major Factors* Optional Poster Board

What you should know

- Remind Advocates that while investigating how the case issues are being addressed (reasonable efforts provided by the State) the ASFA clock is still ticking and these issues are long standing with often long term timeframes needed to fully address.
- Advocates will investigate the CPP to determine what services are being offered, what questions to ask to gather additional information, any strengths outlined related to the Big 3, and their concerns related to barriers of parents being successful to meeting CPP goals.

What to say/do: Approx. 30 minutes total

CUE SLIDE. *Case Study Review of Major Factors*

Activity: Case Study Review. The goal is Understanding the Case Plan & Investigating Advocacy Issues

- It is important to pull these three critical areas (Addiction/ Mental Health, DV) together by asking the Advocates to consider the issues in their Myers Case Study.
- Instruct participants to review the case study documents.
- Remind participants that the Action Plan is a fluid document-as we gather new information through our monthly visits, reading reports, and are monitoring the case, we will identify new questions and potential areas to investigate.
- In pairs, or individually, Outline in **HANDOUT #1 Advocate Case Action Plan: Concerns: What major issues are present in the Myers case?** 10 minutes

Debrief 15 mins: In large group, discuss their concerns. You may do this using poster board and having someone list on the board the ideas shared so everyone can keep track.

Make sure Advocates understand that they should add these ideas to their own handout under concerns as they will use this list in Module 6 when practicing writing their report.

Example Concerns: Can refer to **Fac. Cheat sheet** for detailed list. Amanda (mom): Mental health issues, possible agoraphobia, other diagnosis; Gambling/alcohol dependency; Domestic violence-Josh; Unsure if mom can maintain safe environment; Unacceptable discipline approach; Financial instability- might this impact transportation or ability to pay for counseling; Dad's absent-less emotional support; Ability/Inability to maintain employment; Housing needs; Criminal activity-charges pending-stealing; Missed visitation; Missed work days; Length of time to obtain employment; Child care arrangements set up; Mom's schedule impacts her parenting (wake up); No healthy support system.

- There are other parental based or case issues that are beyond the Big 3 of SA, MH, DV. These might be home cleanliness or employability. Advocates need to understand that they are acquiring information about the looming issues on the case, but they need to also look at all areas of the CPP domains. If they haven't already identified other issues, coach the Advocates to consider issues such as under Home Environment Domain: Mom employed: How is work attendance? For money mgmt issue: is she paying her bills? On time? Physical discipline methods improving; verbal aggression issue improving? Paternity??
- In large group, discuss any additional ideas identified to be added to Strengths **5 minutes**
 - Example: mom is attending anger management classes regularly. Completed is the final goal, but the strength of attending and participating can be called attention to and included in the Strengths section. Mom is now employed, will monitor to assess ability to stay employed.
- Important to recognize that throughout the case we continue to identify new strengths present and share with others.
- Discuss how they might advocate for additional services related to any of those.
 - Note that this is a precursor to recommendations section for later.

Activity: Understanding the Case Plan and Investigating Advocacy Issues related to the Major Factors that impact the family.

- Participants will review the case study documents.
- Discuss with a partner what major issues are present?
- Using the ***Advocate Action Plan*** under **Concerns**, add any concerns about the case and barriers present to meeting the case goals.

In the large group we will share our ideas and consider what additional services might be recommended.

- Under **Strengths** list additional strengths identified that are steps of accomplishment towards the successful resolution of the case issues.



FACILITATOR NOTES**Module 5: Other Risk Factors**

Equipment/Supplies

- Handout: *Risk Factors*
 - Slide: *Other Risk Factors*
-

What you should know

- Remember this is practice and alleviate Advocate concerns about doing their role “right/well enough”.
 - **These types of risk factors that might lead to child abuse and neglect are not necessarily the ones that are outlined in the CPP domains.** They may be present but are not the MSLC concerns that were the basis for the case to open. They also should not be the issues that interfere in an increase in visitation or reunification.
-

What to say/do Approx. 15 minutes

- **CUE SLIDE. ACTIVITY:** Pass out Risk Factors **HANDOUT # 4** and have Advocates read through additional types of risk factors and identify potential additional issues for the Myers family.
 - Check any risk factors that might be present in the Myers family.
 - What concerns would you specifically include based on the information gathered? Add to **HANDOUT #1** Advocate Case Action Plan **Concerns** section.
- **Debrief:** Ask group for ideas on what risk factors they identified that are not already outlined in the CPP.
 - Example: Risk Factors might include: child that reminds mother of absent parent, reminds parent of her own mother who abandoned her as a child; impulsiveness; isolation; sense of entitlement (referenced in social report dated 10/03/06); prejudice (mom references that her neighbors don’t like her since she is black).
- Add these newly identified concerns to their action plan and to the poster board list if electing to do that as a large group.
- Part of the Advocate’s role is to bring to light other concerns they may have. These are not necessarily directly related to the reasons the State became involved in the family’s life. They often are not the basis for removal or returning the child to the home, but can reduce future risks and improve family/parental functioning
 - Example risk factor-age of the child- since risks increase during infancy, what additional support can be put into place if mom became pregnant again.
 - Example risk factor-child reminds parent of another person, such as the other parent that is no longer involved or a grandparent that may have abused them as a child, perhaps additional counseling is recommended to address those perceived similarities.

Other Risk Factors may exist and may or may not be part of the DHS Case plan. These issues can impact and impair parental and family functioning.



Activity: Read through the list of different types of risk factors that could lead to child abuse and neglect and identify potential additional issues for the Myers family.

- Check any risk factors that might be present in the Myers family.
- Using your ***Advocate Action Plan***, outline those concerns in the ***Advocate Action Plan Concerns Section***.

In the large group we will share our ideas on additional risk factors that might need to be considered.

FACILITATOR NOTES**Module 5: Stress**

Equipment/Supplies

- Slides: *Stress in Families -- Stress in Families (2nd) ACTIVITY -- Early Intervention*
 - Slide: *Still Face Experiment Video -- Stress Assessment Tool Module 3*
-

What you should know

- In Module 3 the Advocate completed the “stress test” to assess their stress level.
 - Positives are also included in the assessment. Change in general increases stress level regardless if it is positive or negative, or if the person identifies even themselves as undergoing stress.
 - Everyone has their own level and type of coping skills. What works as a coping mechanism at one point in your life may not work at other times.
-

What to say/do: Approx. 25 minutes

- **CUE SLIDE:** The families we work with are experiencing stress. This stress is both typical life stressors and the toxic stress, in that it is persistent and often not process.
- **CUE SLIDE: ACTIVITY:** Ask participants to refer to Module 3 stress test page 52 and remind them that they will not be asked to share their results. They also determined the stress level for Amanda Myers from our case study. Facilitator Option: Can also list on flipchart all of Amanda Myers expectations and what those add to her stress level.
- **As a group,** discuss the following questions from the stress assessment:
 - What was the resultant stress level? How many times could those “changes” have occurred in a given year? Did you multiply the value outlined for that change by the number of times it may have occurred? Examples to discuss might include:
 - ✓ How many times did Amanda, mother in case study, experience change in health of family members? Children, her father she is caring for.
 - ✓ Change in financial status? Losing benefits, getting a job Increase in funds is still a change.
 - ✓ Change in living conditions?
 - ✓ Change in eating habits? She is trying to be healthy/take care of depression.
 - ✓ How many minor (and major) violations of the law in one year?
 - ✓ Change in social activities? Not going to gamble/drink.
 - How many additional points would you give to having your child removed from your home by the child welfare system?
 - How might understanding the stress level of a family affect your recommendations? What have we learned about toxic stress and trauma and how that might impact individual functioning?
 - How might we gather additional information about the accurate level of the Meyer’s case study mother’s stress level? How might we share any concerns we have about how her stress level may be impacting her parenting and her reactions to other parties on the case? What Strengths related to how individuals are dealing with stress?
 - **CUE SLIDE.** Why do we intervene as soon as possible when there are risk factors that impact what is in the best interest of children, their MSLC, whether that’s due to poverty, substance abuse, mental health, domestic violence, parental and family functioning?
 - **CUE SLIDE. Still Face experiment video. 3 minutes** This reflects the importance of early intervention, and that the families they come in contact with will be dealing with many types of issues that could theoretically create a parental “still face” What might cause this experience for any age child could be parental depression; under the influence of a substance; coping with DV partner.

Stressors that Typically Impact Families

In Module 3 it was shared that just as all families have strengths, at some point all families encounter change, stress, and perhaps even crisis. We've already discussed poverty and the other prominent issues such as addictions, mental health issues and domestic violence that exist in many cases.

It is important to remember that the families you will encounter in your work as an Advocate, by definition, are under stress and are likely to be in crisis—if for no other reason than the state is now involved in determining whether their child remains with them at home.

In Module 3 you completed the “stress test” to assess your stress level. You will not be asked to share your results. You also determined the stress level for our case mother Amanda Myers.

Activity: As a group, let's discuss the following questions from the stress assessment:

- What was the resultant stress level?
- How many times could those “changes” have occurred in a given year? Did you multiply the value outlined for that change by the number of times it may have occurred?
- How many additional points would you give to having your child removed from your home by the child welfare system?
- How might understanding the stress level of a family affect your recommendations?
- Are there strengths or concerns you have for the Myers case related to their overall stress levels and life stressors that could be outlined in your **Advocate Action Plan: Strengths or Concerns** section?



FACILITATOR NOTES**Module 5: Gathering Objective Information**

Equipment/Supplies

- Slide: *Gathering Objective Information*
-

What to say/do:

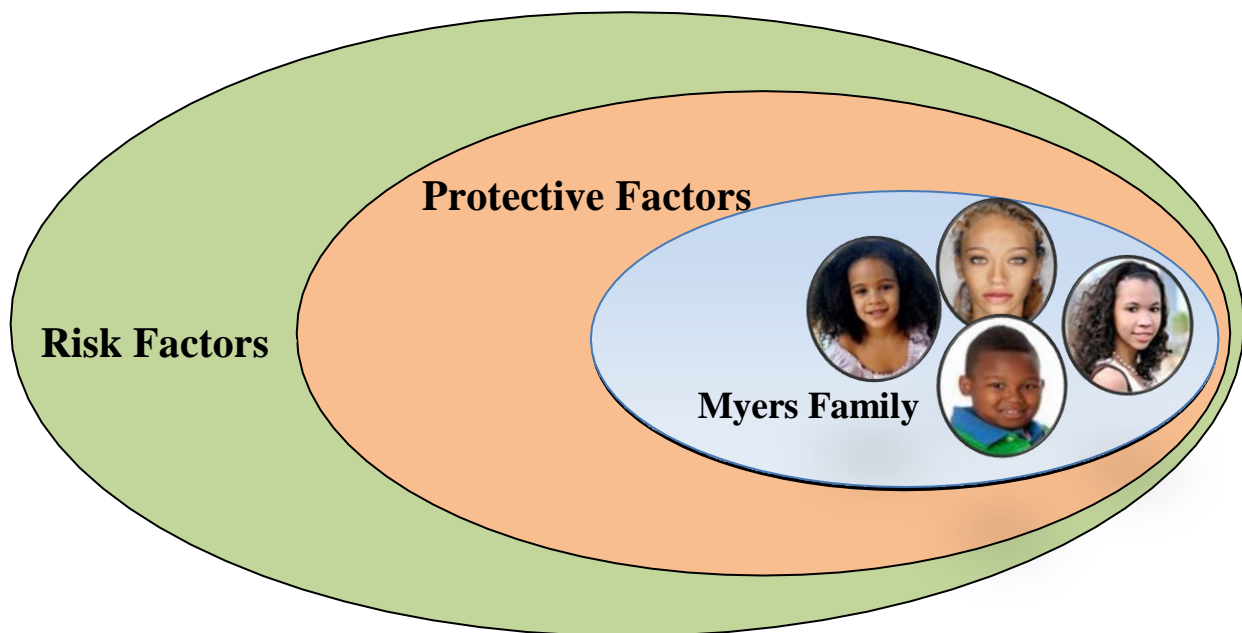
- **CUE SLIDE.** *Gathering Objective Information*
- During training we have been investigating both the strengths (protective factors) and the concerns (risks) for families. Part of the advocacy role is to gather objective, independent information about the case.
- The next part of the training in Module 5 is to practice these skills in more depth.
- In order to be effective in our role, it is important to prepare in advance our plan regarding whom we gather information from and what type of information we may determine is important to inquire about from various parties.
- Each case is unique and unfolds in its own way, requiring different information in order to meet the needs of a particular child. The work of a CASA Advocate—conducting interviews, gathering facts, writing reports, testifying in court, advocating for the child, monitoring the case—has a significant impact on the case outcome. Each piece is an important part of the Advocate's role.
- The end product of the CASA work is the CASA Report to the Court. The foundation of the CASA role is to gather and share independently acquired objective information. Our thorough report that includes this information is given credibility by maintaining our objectivity in all parts of our role.

Gathering Objective Information

In order to be effective in our role, it is important to prepare in advance our plan regarding whom we gather information from and what type of information we may determine is important to inquire about from various parties.

Each case is unique and unfolds in its own way, requiring different information in order to meet the needs of a particular child. The work as a CASA Advocate—conducting interviews, gathering facts, writing reports, testifying in court, advocating for the child, monitoring the case—has a significant impact on the case outcome. Each piece is an important part of the Advocate's role.

The end product of the CASA work is the CASA Report to the Court. The foundation of the CASA role is to gather and share independently acquired objective information. Our thorough report that includes this information is given credibility by maintaining our objectivity in all parts of our role.



FACILITATOR NOTES**Module 5: Observation**

Equipment/Supplies

- *Pictures of Children (4 different images)* Each coordinator should receive a set these pictures in laminated format.
 - Slides (4): *Observation Activity* starting with closest image.
-

What you should know (This section should take approx. 20 min.)

It's very easy to make assumptions and inferences when looking at these pictures or making observations on a case.

What to say/do

- Being a CASA Advocate, you will be making observations and reporting those observations each month. Documentation of your observations should be fact-based. Let's practice finding the facts.
- **ACTIVITY:** (15 minutes) *Do not show the first slide until you're ready to start group discussion after small group/independent discussion.*
- Depending on the size of the group, ask the participants to break into small groups of 4 people. Assign each group one picture. The pictures are the same image, magnified three times.
- Give the group one minute to discuss the facts they find in each picture. List two or three fact-based observations the group makes for each picture. Then, using those fact-based observations, decide how the child(ren) might be feeling. Ask the groups to record the expressions or behaviors that lead them to believe a child is feeling a certain way.
- Report out on this to the large group.
- **CUE SLIDE** Group 1. Talk about fact-based versus observations that include inference.
- **CUE SLIDE** Group 2. Talk about fact-based versus observations that include inference.
- **CUE SLIDE** Group 3. Talk about fact-based versus observations that include inference.
- **CUE SLIDE** Group 4. Talk about fact-based versus observations that include inference.
- Tie in the previous module about the development of the child, and that our observations may be skewed by the child's developmental stage or health needs. This is one reason why it's incredibly important to gather as much factual information as possible. Additionally, using fact-based observations helps an Advocate stay objective when reporting.

Debrief notes if needed on FACTS vs ASSUMPTIONS

- Man and woman looking at each other vs Couple fighting, mom's chin up, not submissive, defiant stance, man's fists up
- Two children vs siblings: Appear parentified, comforting one another, adult comforting a child, holding onto each other.
- Younger child – eyes closed, afraid, shutting it out, not happy, doesn't want to be taken away.
- Older child – concerned, responsible, protective.
- Both well cared for, clean clothes, clean hair.
- Brick wall: where they live, at school, graffiti bad neighborhood, window – screen door, bars – case door.
- Outside – girls saw each other at school.
- Adult? Child pregnant?
- Witness – reflection of man in picture watching scene.

Making Observations

Being a CASA Advocate, you will be making observations and reporting those observations each month. Documentation of your observations should be fact-based. Let's practice finding the facts.

Activity –Making observations:

In small groups, look at the photos provided.

- What fact-based observations can you make about each picture?
- After determining the facts, record the behaviors and expressions that you believe indicate how the child is feeling. Compare your responses.
- Share a sample of your group's responses in the large group.

Picture 1:

Picture 2:

Picture 3:

Picture 4:

As an Advocate, remember when observing a child's development, keep these points in mind:

- There is a wide range of typical behavior, and at any particular age 25% of children will not have reached the behavior or skill, 50% will be showing it, and 25% will already have mastered it;
- Some behaviors may be typical—in the sense of predictable—responses to trauma, including the trauma of separation as well as abuse and neglect;
- Prenatal and postnatal influences may alter development;
- Other factors, including culture, current trends, and values, also influence what is defined as typical; and
- Advocates need to become aware of their own values, attitudes, and perceptions about what is typical in order to be more objective and culturally sensitive when assessing a child's needs.

FACILITATOR NOTES**Module 5: Observation Considerations**

Equipment/Supplies

- Slide: *Considerations for Observations*
-

What you should know

When Advocates are intentional about their observations and keeping them fact-based, it helps the Advocate remain objective and keep their personal values out of their written narrative and reports.

What to say/do

- **CUE SLIDE:** *Considerations for Observations*
- Walk Advocates through the participant pages of types of considerations to think about as they are observing children.
- It's important to touch on all the points.
- Many of these same considerations can be used when making observations about parents, for both parent and child during visitation, and in the child's different environments.
- It's important to observe children and their parents in more than one environment to help understand behaviors in each environment.
- Now imagine how others might observe you when you are experiencing a stressful day. How might our observations be impacted by the trauma the individual has and is experiencing? This is why it's critical to make observations in a variety of settings and over a period of time.

Types of Considerations for Observations

Knowledge about how people communicate is important while gathering information from children. Some children can talk about their situations and their wishes, but other children do not have verbal and developmental skills sufficient to express their needs and wishes. Because the verbal skills of children vary, fact-based observations about a child are a vital part of a CASA Advocate investigation.

The following questions will help provide valuable information about a child:

- 1. What is the specific situation in which the child is operating?** What other activities are going on? What are the general expectations of the group at the moment and what is the general atmosphere of the room—calm, noisy, boisterous, quiet?
- 2. What is the child's approach to materials and activities?** Is the child slow in getting started or does he/she plunge right in? Does the child use materials in the usual way or does he/she use them in different ways, exploring them for the possibilities they offer?
- 3. How interested is the child in what he/she is doing?** Does the child seem intent on what he/she is doing or does the child seem more interested in what others are doing? How long is his/her concentration span? How often does he/she shift activities?
- 4. How much energy does the child use?** Does the child work at a fairly even pace or does he/she work in spurts of activity? Does the child use a great deal of energy in manipulating the materials, in body movements, or in talking?
- 5. What are the child's body movements like?** Does the child's body seem tense or relaxed? Are movements jerky, uncertain, or poorly coordinated?
- 6. What does the child say?** Does the child talk, sing, hum, or use nonsense words while he/she works? Does the child use sentences or single words? Does the child communicate with others using words or gestures?

FACILITATOR NOTES**Module 5: Considerations Continued**

Equipment/Supplies

What you should know

What to say/do

- Continue walking Advocates through the next participant page of types of considerations to think about as they are observing children.
- At every opportunity, ask participants to share their own experiences of observing children. Ask whether any of their observations provided a big clue as to what was going on with the child.
- If we were to make some observations about the infant in the “still face” video, what might we state? What would we state about our observations about the mother’s response to the baby?

- 7. What is the child's affect (visual emotions)?** What are the child's facial expressions? Does he/she appear frustrated? Happy?
- 8. How does the child get along with other children?** Does the child play alone, with only certain children, or with a variety of children? Is the child willing or unwilling to share toys? Does the child always initiate or always follow along with group ideas?
- 9. What kinds of changes are there from the beginning to the end of an activity?** Does the child's mood change during that period?
- 10. What is the child's relationship with you?**
- 11. What is the child's relationship with others: parents, caseworker, attorney, foster parents, etc.?**
- 12. What seems "different" or "troubling" about this child as compared with other children of the same age?**
- 13. Are there issues that you think should be checked out by a professional (vision, hearing, dental health, cognitive development, physical development, psychological development, etc.)?**

Adapted from "Assessing a Child's Welfare," Eunice Snyder, ACSW, and Keetjie Ramo, ACSW, School of Social Work, Eastern Washington University, 1984

FACILITATOR NOTES**Module 5: Practice Gathering Information**

Equipment/Supplies

- Slide: *Practice: Gathering Information*
 - Handout #1: *Advocate Case Action Plan*
 - Handout #__ : *Sample List of Questions*
-

What you should know

- We reviewed stages of interviewing related to successfully gathering info in Module 4.
 - Review the importance of understanding the goals and expectations outlined in the CPP as this is what the court orders to be followed. Advocates are investigating and monitoring the progress and barriers that exist for the successful resolution of the case issues so that we can achieve a successful permanency goal of reunification.
 - This activity is meant as a starting point for practicing the skills of identifying issues to be explored, the types of questions that may be asked and how to frame those questions as related parental issues. In Module 4 they completed a similar role play activity connected to asking questions related to **children's** issues. The experience may trigger worry/anxiety for some. That is normal and common when first assigned. Remind them that they will be provided additional support once assigned by their Coordinator/CASA Coach.
-

What to say/do: Approx. 30 minutes

- **CUE SLIDE.** *Practice:Gathering Information* State: Remember that each case is unique and unfolds in its own way, requiring different information to be gathered. We gather that important information in order to report on what we have identified as strengths, concerns, and recommendations by making observations and asking questions..

ACTIVITY: Using **HANDOUT #1** Advocate Action Plan which has been used throughout the training, instruct participants to pair up. Encourage them to move around the room to have some space to complete the activity related to **parental and family issues** in the Myers Case Study. Pass out the **HANDOUT # 5 Sample list of Questions** to be used as a cheat sheet of sorts for types of questions they may want to ask related to the CPP domains. Outline the instructions in the participant material. Option to remind them they received **Asking Questions HANDOUT # 6** in Module 4 that also provides some interesting questions to ask of parties.

- Each participant will have the opportunity to practice asking questions to gather additional information. *Stop the group after 10 mins so that the partner can practice asking questions as the Advocate.*

Debrief 10 min: Facilitate a discussion on the importance of having prepared in advance some initial questions or concerns you have about the issues and the plan.

- Visits with Children –Some things to consider might include the location and who else is present; how to handle boundary issues, what to do about physical contact.
- Visits with parents: Be mindful of children in earshot. Often the kids in the system have been over exposed to adult conversations. We want Advocates to be sensitive to that issue and not participate in conversations with other adults with kids present. Each Advocate learns how to navigate that type of issue in a manner that is most natural to them while being respectful to the party speaking and the sensitive nature of the conversation.

Practicing the Role: Successfully Gathering Information

Advocates need to gather information and ask questions. Effectively completing that work takes preparation regarding what questions the Advocate needs to ask and entails good note-taking. In addition, it requires consistently maintaining your objectivity.

Activity: Using the Advocate Action Plan which has been used throughout the training, we will practice the CASA role of gathering information and asking questions related to the parental and family issues in the Myers Case Study.

- In pairs, one person will practice asking questions as the Advocate related to **parental issues**. Their partner will answer those questions as a Case Study character.
- Participants will explore gathering additional information that has been identified in our strengths or concern areas, or provided in the ***Sample List of Questions Handout***.
- Each participant will have the opportunity to practice asking questions to gather additional information.



FACILITATOR NOTES**Module 5: Asking Questions/Note Taking**

Equipment/Supplies

- Slide: *Asking Questions and Note Taking*
-

What you should know

- This section can also be used to answer other questions that were placed on the parking lot.
-

What to say/do

- **CUE SLIDE.** *Asking Questions and Note Taking*
- Every Advocate determines their own method for taking notes and keeping track of their information gathered.
- Notes should be fact based and not assumptions or conclusions you are making about what you observed. This includes what was said, what the Advocate saw using specific facts using their senses (sights/sounds/smells/touch) and not what the Advocate believes was meant or how someone feels. A metaphor that might be used is to pretend that the Advocate is a movie camera. They are including in their notes what they saw in a fact based way, so that the reader could almost “see” what the Advocate saw.
- Ultimately, the Advocate’s notes about information gathered formulate recommendations regarding the child’s best interest. The written court report and testimony are the vehicles by which these recommendations are presented to the court. Clear, fact-based reports and recommendations will enhance the judge’s ability to make good decisions about the child. Thus, good notes are important to accurately reflect all the valuable information gathered.
- It is important to remember that an objective report must include information from the Advocate’s contact with all parties. This contact should occur regularly and be included in the report even if the Advocate believes they might already know the answers to their questions, it still needs to be gathered.
- It is expected that the Advocate will have monthly face to face contact with the child/ren. It is important to maintain a relationship with the child and also model consistency and follow through for those whom may not have experienced that in the past.
- If the initial permanency goal is reunification, it is critical to gather information and share any barriers the parents are experiencing to being successful and having their children returned to their care. Regular contact with the parents is also strongly recommended to demonstrate objectivity and validity in the CASA report.
- Failing to follow basic CASA responsibilities can lead others to lose faith in the Advocate’s abilities and the CASA Report to the Court can lose validity in the eyes of others.

Preparing Your Questions

As an Advocate, you make initial contacts with the child, the parents, and the foster parents—in whatever order is most relevant to the case. In almost every case, the DHS case manager will be one of the first people you interview. You will also often include the child's teacher or childcare provider and the child's therapist (although this resource may not be part of your initial plan if the child has not been in therapy prior to coming into care). Each of these people may be an information source for more than one question. In planning your interviews, it is helpful to write down your questions so that you cover all of the topics that seem important for your investigation.

Keys to Good Note Taking

As an Advocate, you will gather information from many different sources during the course of your investigation and monitoring of a case. People and their stories run together. Facts can become cloudy, especially if the case is not heard in court immediately. It is vital that you keep accurate and thorough notes about the date and content of each case contact, whether it is a planned interview, an impromptu visit to a school, a phone call, or a review of a record. Following are important elements to include in your notes about each case contact:

- Person contacted
- Type of contact (telephone call, email, in-person conversation, review of record, etc.)
- Date and time
- Place (parent's home, job, jail, etc.)
- Factual observations
- Feelings expressed by those interviewed
- Facts gathered
- Summary of what happened
- Your plan of action
- Other person's plan of action
- Decisions

Ultimately, you will use your notes about information you gather to formulate recommendations regarding the child's best interest. Your written court report and testimony are the vehicles by which these recommendations are presented to the court. Clear, fact-based reports and recommendations will enhance the judge's ability to make good decisions about the child you represent.

FACILITATOR NOTES**Module 5: Contact with other parties**

What to say/do:

- *Cover underlined bullet points and any others based on Advocates Questions.*
- **Things to consider regarding Contact with Children**
 - Prepare a child's statement to the court. Ask child directly (if age appropriate) or provide a written statement. "Is there anything you want me to tell the judge?" If the child says, "I want to talk to judge." Tell the child "I'll talk to someone -about that." Tell coordinator and this process will be further outlined.
 - Never address the allegations of abuse with the child.
 - Remember to be age appropriate and sensitive to the amount and adult nature of information that others may have shared with the child in the past.
- **Things to consider regarding Contact with Parents**
 - Do not use tape recorder during interview. Can take notes or not. Be careful what is written down in front of them. Need to be able to show parent if asked.
 - Can keep first visit short. Tell them on the phone "I can't stay for long. I'll just be visiting for about 15 minutes."... Especially if concerned about safety. Being respectful and still building rapport.
 - Can meet in public place first to assess safety. Tell someone you are going to a visit, leave address if safety is a concern.
 - Can go with an in-home provider, but do this only as needed.
 - They may not be happy about another person being involved in their lives. Explain your role, make sure they understand that you are a *volunteer* Advocate, not part of DHS, and you are serving to represent the best interest of their children. Advocates have said that their experiences with parents have been different. Some positive, some negative, some very difficult to get information.
 - Something that may help is asking "Why do you think DHS is involved in your life?" Remind parent what they need to be doing according to the CPP/Court Order & directing them to DHS/FSRP/their attorney. Put in report and their response. Can do this nonchalantly or matter-of-factly, "How are you doing on that?"
 - CASA should inquire if parent understands what the expectations of the court are for them to be successful and to meet permanency goal. If they do not, this should be shared with DHS and parent's attorney.
 - Don't forget about fathers: Keep asking "Where is dad?"
 - If parents ask for things (money), or you recognize a need, CASA cannot provide that, or meet that need. We can share with others resources we found that may be available, and it is their role to offer that resource to the family.
 - Frequency of contact based on permanency goal.
 - Can do unannounced visits if appropriate. This will be determined based on the case specifics.

Contact with Other Parties

Things to consider regarding Contact with Children

- Prepare child's statement to the court. Ask child directly (if age appropriate) or provide a written statement. Is there anything you want me to tell the judge?" If child says, "I want to talk to judge." Tell child "I'll talk to someone about that." Tell coordinator and this process will be further outlined.
- Never address the allegations of abuse with the child.
- Remember to be age appropriate and sensitive to the amount and adult nature of information that others may have shared with the child in the past.

Things to consider regarding Contact with Parents

- Do not use tape recorder during interview. Can take notes or not. Be careful what is written down in front of them. Need to be able to show parent if asked.
- Can keep first visit short. Tell them on the phone "I can't stay for long. I'll just be visiting for about 15 minutes", especially if concerned about safety. Being respectful and still building rapport.
- Can go with an in-home provider but do this only as needed.
- They may not be happy about another person being involved in their lives. Explain your role, make sure they understand that you are a volunteer advocate, not part of DHS, and you are serving for the best interest of their children. Advocates have said that their experiences with parents have been different. Some positive, some negative, some very difficult to get information.
- Something that may help is asking "Why do you think DHS is involved in your life?" Remind parent what they need to be doing according to the CPP, & direct them to DHS or their attorney. Put in report and their response. Can do this nonchalantly or matter-of-factly, "How are you doing on that?"
- Advocate should inquire if parent understands what the expectations of the court are for them to be successful and to meet permanency goal. If they do not, this should be shared with DHS, parent's attorney.
- Don't forget about fathers: Keep asking "Where is dad?"
- If parents ask for things (money), or you recognize a need, CASA cannot provide that, or meet that need. We can share with others resources we found that may be available and it is their role to offer that resource to the family.
- Frequency of contact based on permanency goal
- Can do unannounced visits if appropriate; determined based on the case specifics.

FACILITATOR NOTES**Module 5: Contact with other parties****What to say/do:**

Cover underlined bullet points and any others based on Advocate's Questions. Notes continued:

- **Interviewing the DHS Caseworker**
 - They often give you the most up to date information.
 - Contact with DHS needs to be done in the beginning of getting assigned to the case.
 - Check in with DHS regularly to gather new information; frequency determined by the issues of the case.
 - Discuss what Advocates should do, and what Coordinator will help with, if the Advocate does not get a response from DHS after attempting to contact them.
 - May need to explain your role in more detail.
 - Do not email confidential content to DHS as email does not protect confidential information and the email can be printed off and included in DHS report to court.
 - Every worker may have different styles, so how we interact with them will vary.
- **Foster Parents**
 - Gather information from them; do not share information with them.
 - Be respectful of foster parents' schedule. But if concerned, can do an unannounced visit with Coordinator/CASA Coach approval.
- **School Teachers**
 - Teachers and other school personnel are fantastic sources of information. It is important that necessary court orders are provided so they are comfortable sharing information with the Advocate. Advocates are a sponge - gather information - do not share.

Other notes of importance.....

- Advocates will never send any correspondences/letters without Coordinator involvement. Any formal correspondence will be put on letterhead, with a copy of letter placed in file.
- Limit e-mail. If do, cc Coordinator. Have Advocate forward any response to Coordinator/CASA Coach. Emails can be printed and forwarded. If they are necessary, they should be fact based and not include assessments/opinions or confidential information.
- DHS – 1st call: Introduce self, give number, get his/her perspective/advice. Ask if there is anything you can do to help her/him. Get any missing contact information (names, addresses, phone numbers). Don't tell people what to do, but use the words, "Can we...?"
- Advocate calls DHS & GAL monthly if appropriate with new information to update. OK to leave on voice mail "No need to call me, but feel free if you have any questions or concerns."
- Therapists – Critical to talk to them. Don't need nitty-gritty of what is discussed in therapy. 1) Are they going? How often? How many times have they been to therapy? 2) "Do you have any concerns about how client is doing?" 3) Are they making progress? Request a report for court if needed.
- Talking to Attorneys – Must have the parent(s)' attorney's permission to speak to their clients. Dad and mom's attorney –just talk about the parents, not the child. This is dependent upon release. With the GAL/Child's Attorney – can talk about parents and child.
- To the Advocate--Don't feel bad about "bothering" the Coordinator/CASA Coach. We expect a lot of phone calls and/or e-mails at first.

We have a specific in-service training on next steps after case assignment that will cover in much more detail these types of issues.

Interviewing the DHS Caseworker

- They often give you the most up to date info
- Contact with DHS needs to be done in the beginning of getting assigned to the case
- Check in with DHS regularly to gather new information; frequency determined by the issues of the case
- Discuss what advocate should do, and what coordinator will help with, if the advocate does not get a response from DHS after attempting to contact them.
- May need to explain your role in more detail
- Caution with emailing content to DHS as this can be printed off and included in DHS report to court.
- Every worker may have different styles, so how we interact with them will vary.

Regarding Foster Parents

- Gather info do not share
- Be respectful of foster parents' schedule. But if concerned, can do an unannounced visit with coordinator/coach approval.

Regarding School Teachers

- Teachers and other school personnel are fantastic sources of information. It is important that necessary court orders are provided so they are comfortable sharing information with the advocate. Advocates are a sponge- we gather information, do not share or do.

Other notes of importance.....

- An Advocate will never send any correspondences/letters without coordinator involved – any formal correspondence put on letterhead and copy of letter placed in file.
- Limit e-mail. If do, cc coordinator. Have CASA forward any response to coordinator/coach. Emails can be printed and forwarded. If they are necessary, they should be fact based and not include assessments.
- DHS – 1st call: Introduce self, give phone number, and get his /her perspective/advice. Ask if there is anything you can do to help her/him. Get any missing contact information (names, addresses, phone numbers). Don't tell people what to do, but use the words, "Can we...?"
- Advocate calls DHS, GAL and attorneys monthly to update. OK to leave on voice mail "No need to call me, but feel free if you have any questions or concerns."
- Therapists – Critical to talk to them. Don't need nitty-gritty of what is discussed in therapy. 1) Are they going? How often? How many times have they been to therapy? 2) "Do you have any concerns about how client is doing?" 3) Are they making progress?
 - Talking to Attorneys – Dad and mom's attorney –just talk about them, not the child. GAL – can talk about parents & child
 - For the Advocate--Don't feel bad about "bothering" the coordinator/coach. We expect a lot of phone calls or e-mails at first.

FACILITATOR NOTES

Module 5: Contact with other parties

What to say/do:

- Volunteer Safety should be covered if questions have not already been asked by participants about this issue
- Read through red box.

Volunteer Safety

This program is highly invested in keeping you—the CASA Advocate—safe. If you ever have a question or concern about the safety of any aspect of your work, or if you feel apprehensive or fearful, you should immediately consult with your Local Coordinator. Your Local Coordinator holds the responsibility of determining safety issues based on the case circumstances and how to address any potential safety concerns.

The safety tips below are mostly common sense and good advice whether you are doing CASA volunteer work or not.

- Tell someone where you'll be, how long you'll be there, and when you expect to return. If plans change, call and let that person know.
- Think ahead. Know the situation and know where you're going in order to look confident.
- Be aware of the immediate area.
- Be respectful of the neighborhoods and homes you are entering, but keep safe.
- Travel in pairs if necessary. Ask that your Coach accompany you.
- If you or your local coordinator would question whether an individual is safe to meet with, arrange to meet in a public place, in their attorney's office, at the DHS building, in the Court conference room, at the CASA Office, etc.
- Avoid carrying a bag.
- Do not wear expensive jewelry.
- Trust your instincts. If you are uncomfortable, take protective action—walk away. Don't react; visit briefly, make up a typical excuse, i.e. another appointment, and leave the premises.
- Don't share personal information about yourself or your family.
- Do not "friend" individuals involved in your case on Facebook.
- All correspondence and communication should flow through the CASA program staff with, at a minimum, a courtesy copy for emails to the coordinator.
- If you witness or see signs of illegal activity, remove yourself from the situation and contact the police
- Regardless of whether a volunteer possesses a non-professional concealed weapons permit, volunteers for the CASA program may not possess a weapon at any time while conducting any work within the scope of CASA duties. This includes possession of firearms, electroshock weapons, knives, explosives and any chemical whose purpose is to cause harm to another person.

FACILITATOR NOTES**Module 5: Monthly Update and Other Duties**

Equipment/Supplies

- Handout #____: *Case Study Documents: Monthly CASA Advocate Update*
 - *Life Skill Assessment* available for those that are interested in looking at it.
 - Slide: *Advocate Responsibilities*
-

What you should know

- Participants should have heard these points already but they are important enough to review and remind them of those expectations.
-

What to say/do: Approx. 5 minutes

- **CUE SLIDE.** *Advocate Responsibilities*
- Go over the key expectations including completing a monthly report that is provided to the Coordinator/CASA Coach.
- Submit monthly donated miles and hours to Coordinator/CASA Coach.
- Discuss the importance of regular contact with the Coordinator/CASA Coach about the case.
- Share that case relevant ongoing training is provided and can be based on the issues that are identified during the month.
- Monthly contacts with interested parties.
- Draft Report due to the Coordinator/CASA Coach in enough time to for corrections, additions, changes and final report ready for distribution on time.

Monthly Advocate Update & Other Duties

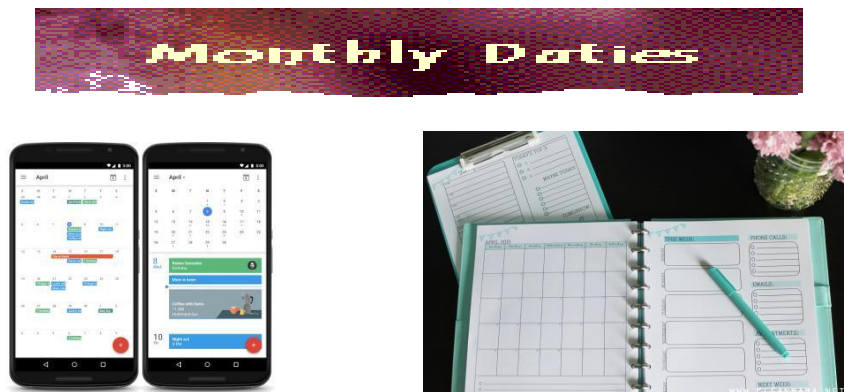
As an Advocate:

In addition to completing a CASA report to the Court for hearings, your Coordinator or CASA Coach will ask that you submit a monthly report, detailing the work you've done on the case each month. The report is an electronic document which can be sent via email to your Coordinator/ CASA Coach. The monthly report is structured such that you will be able to pull information directly from the monthly update for your Court Report.

Please see the *Monthly Advocate Update* Handout to learn what types of information you'll be asked to gather each month.

You will be maintaining regular contact with your Coordinator/CASA Coach about your work and the progress of the case. If you are assigned a CASA Coach, your coach is then responsible to have monthly contact with your coordinator about your case and your work.

There are additional duties that will be explored more in Module 6 that includes submitting your donated hours and miles every month and completing ongoing CASA trainings throughout the year.



FACILITATOR NOTES Module 5: CASA Report & Recommendations

Equipment/Supplies

- Slide: *CASA Report Responsibilities*
 - Slide: *Myers Case Timeline*
 - Slide: *Important Considerations*
 - Handout #6: *Permanency Questions to Consider*
-

What you should know:

- Throughout Mod 4 & 5, we've been compiling the type of information on the **Advocate Action Plan** that an Advocate might decide is important to include in their report.
 - Remind Advocates that additional report writing in-service trainings will be offered "just in time" to coincide with their need to write their CASA report.
 - This section is to reiterate concepts shared throughout the training that Advocates are constantly gathering information to report to the court what recommendations they have regarding what is in the children's best interest and keeping the need for permanency in focus.
-

What to say/do: Approx. 5- 10 minutes for brief overview. Concepts should have been woven throughout 2-5.

- **CUE SLIDE.** *CASA Report Responsibilities.* Writing the CASA report is the culmination of the Advocate's hard work thus far. It includes the observations and facts gathered on the domains of the case, the identification of the family's strengths, the Advocate's concerns based on the information gathered or barriers identified, and the Advocate's recommendations.
- **CUE SLIDE** *Myers Timeline* After reviewing the Myers case study documents, reading the case update, and outlining issues during this training session, during Module 6 participants will practice writing a report to the court for the permanency hearing.
- It is important to understand the critical nature of advocating for permanency. This is the hearing that occurs 12 months after a child has been removed from their parent's care, or in Iowa could occur at 6 months if child under the age of 4. For this age, the child must have been removed for at least 6 of the last 12 months, or last consecutive 6 mos with any trial home placement less than 30 days along with must be clear and convincing evidence that the child cannot be returned home at the present time. The Judge must decide if it's likely that the children will return home or if the court needs to focus on the concurrent plan.
- Important to go through court options for permanency goals at next hearing.
- **CUE SLIDE:** *Important Considerations* It is important for CASAs to remember the concept of a child's sense of time and the importance of making timely decisions when they need to be made as every child deserves a permanent family.
- Pass out **HANDOUT # 6** *Permanency Questions to Consider* that they can use as they consider outlining their recommendations in Module 6.
- Reminders: On real case, a draft report must be submitted to the Coordinator/CASA Coach with enough time to schedule the report revisions and provide a final report to Court by the individual's court due date. (varies by county)
 - Also once the Advocate has completed training and is assigned to a case, a CASA Coach, or the Coordinator if there is no coach, will provide the feedback and corrections for all the CASA Court reports.

CASA Reports and Recommendations for Permanency Hearing

Each hearing is critical in the life of the child. Our reports are expected to be submitted on time so all parties have a chance to read the report and address any issues in time to come to court prepared. We never want our report to get to court late and have that be the basis why the hearing must be continued. The result of delaying a hearing is not what is best for children: The delay of having permanency in their life.

The Permanency hearing must be held no later than at 12 months after a child has been removed from the home. In Iowa this may be done at the Judge's discretion at 6 months if the child is under the age of 4. At this hearing, the judge must decide if it's likely the children will return home or if the Court and DHS need to focus on the concurrent plan.

The judge can choose one of the following options from the Iowa Code 232.104:

1. Return the child home
2. Current placement for 6 additional months
3. Termination of Parental Rights (*with the goal of adoption*).
4. Transfer guardianship and custody to a suitable person (*Relatives*)
5. Transfer sole custody from one parent to another parent.
6. Transfer custody to a suitable person for the purpose of long term care, such as with a relative
7. Another Planned Permanent Living Arrangement (APPLA) if compelling reasons that other options are not in the child's best interest have been documented to the court's satisfaction. This permanency option is not allowed for youth under 16.

If reunification is not possible at the time of the hearing, but looks favorable, the court can find "compelling reasons" to give an extension of 6 more months for reunification to occur. A permanency order that is based on #2 must enumerate the specific factors, conditions, or expected behavioral changes which comprise the basis for that determination that will no longer exist at the end of the additional 6 month period.

If termination of parental rights is not in the child's best interest, the judge can order the establishment of a Guardianship with a relative or other appropriate caregiver.

FACILITATOR NOTES**Module 5: Foster Care**

Equipment/Supplies

- Slide: *Foster Care*

*Updated Rates as needed Supplemental Fac. Info

What you should know

- As Advocates work through the importance of permanency, reunification, and how MSLC influences recommendations, they can struggle with how the higher optimal standard of many foster homes are not in the child's best interest.
 - The foster care and day care rates are updated annually. The facilitator will need to make sure they have the most up to date rates. Since these change, there are not included but should be added by the facilitator.
-

What to say/do: Approx. 10 minutes

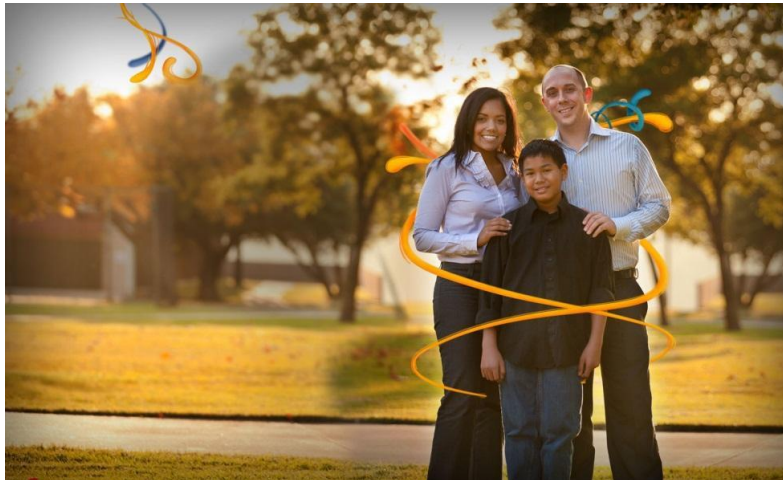
- **CUE SLIDE.** *Foster Care.* Advocates are to be objective about what is in the best interests of children.
- The system starts with the premise that children do best if they can be reunified with their biological family. The standard used to assess this is Minimum Sufficient Level of Care and it is often not the optimal level or what is provided in foster care.
- When considering permanency options for children it is important to remember foster care is meant to be a temporary solution to help families reunite, not a long term placement option for children.
- Facilitate a discussion on some of the stereotypes that exist regarding foster homes.
- If participants do not share, offer i.e. that they are only in it for the money.
 - Share the current foster care rates and the current state day care rates. Found online for updates.
 - Conclude that if you wanted to make a living, it makes more sense to do day care for the state.
- Offer the alternate stereotype that foster homes are so fantastic and are "better" than the biological home. There might be more structure/routine, more disposable income in the household for foster children to participate in extracurricular activities etc. than if they went back home. Thus, foster homes are stereotyped as being "better".
- There is now a federal law that outlines what is called the prudent parent standard. This can be covered in more detail in a follow up in-service training but essentially it means that a child in foster care should not be denied typical childhood experiences because of being in foster care. This means the state is to provide support to foster parents to ensure that they are able to be involved in activities such as going to the prom or participating in classmate's birthday parties.
- Ask participants how MSLC impacts decision making and recommendations for reunification as a transition to the next section.

Permanency Options and the Critical Role of Foster Parents

When considering permanency options for children it is important to remember that foster care is meant to be a temporary solution to help families reunite, not a long term placement option for children.

“The primary goal of foster care is to reunite the child with his or her family. If that cannot happen, another permanent plan is carried out. Foster parents must help children and their parents reach this goal: *“Foster parenting then, is not a lifetime commitment to a child or teen, but a commitment to be meaningful to a child’s lifetime.* Foster family care usually means families helping families.”

E. M. Paszior, *Preparation for Foster: Preservice Education for Foster Families. A Training Manual* (Ft. Lauderdale, Florida: Nova University, revised 1983)



Advocates are to be objective about what is the best interest of children. The system starts with the premise that children do best if they can be reunified with their biological family. The standard used to assess this is Minimum Sufficient Level of Care and it is often not the optimal level or what is provided in foster care.

Activity: Discuss the following questions.

- What are the stereotypes of Foster Families?
- What is the reality of foster care?

Equipment/Supplies

- Slide: *Why MSLC Standard Is Important*
- Slide: *Connections* Post-it Notes : 5 per Advocate

- Have an understanding of participant material on this topic.
- Encourage the sharing of ideas and concerns, about how MSLC impacts decision making. It is often difficult for Advocates to support MSLC. Thank Advocates for expressing their concerns, and don't try to contradict or resolve them. Discussing their responses regarding best interest should answer most of their concerns.
- The purpose of the activity is to remind Advocates of the critical importance of family and reunification with family and how that impacts their entire sense of self as an individual.
- The Connections Activity could be a screening tool. Observe anyone that struggled with it and share with the Coordinator/CASA Coach how it could impact their functioning as an Advocate.

- **CUE SLIDE. Why MSLC Standard Is Important** - It is important for Advocates to understand the minimum sufficient level of care (MSLC) standard and why it is the standard applied to families and children.
- MSLC was introduced discussed throughout training, but many participants gain a deeper understanding of this principle after learning more about the challenges families face and the issues that bring children into care.
- AS a reminder the reasons WHY MSLC is used as the Standard:
 - It maintains the child's right to safety and permanency while not ignoring parent's rights to be with their children.
 - It is required by law – as a practical way to determine reasonable efforts.
 - It is possible for parents to reach.
 - It's a reference point for decision makers.
 - It protects to some degree from individual biases and value judgments.
 - It discourages unnecessary removals of children from homes.
 - It discourages unnecessary long placements in foster care.
 - It is sensitive across cultures.
- As an Advocate routinely ask the question of parents and DHS case managers:
 - "How will you know when this requirement is met?" and
 - "What will it look like when the family has demonstrated success and a child can be returned home?" **These questions are on Participant pg 38**
- **CONNECTIONS ACTIVITY:** Ask that participants complete an activity that illustrates these points. Each Advocate will need 5 post-it notes. *(There are not notes in participant manual for this activity).*
- **CUE SLIDE. Connections.** Talk soft & slow to quiet the mood. "I'd like for everyone to close your manuals now. We're going to end this section with an activity. As we go through this exercise, remember that although we want you to take it seriously, it is just an exercise. Even if you find it difficult at times, it will be worthwhile to complete the exercise to gain a full understanding of why we include it in training." **(continued on next pg)**

Why the Minimum Sufficient Level of Care (MSLC) Standard Is Important

Children grow up best in families. To develop into functional, emotionally stable adults, they need that unique sense of belonging that comes from being part of a family. Children need the safety net that only the unconditional acceptance of family can provide. They need the knowledge of and connection to their cultural/ethnic heritage that is learned within the family.

Adapted from *Beyond Rhetoric: A New American Agenda for Children and Families*, National Commission on Children, Government Printing Office, 1991.

As an Advocate, you start with the assumption that a child's family is usually the best setting for raising and nurturing that child as long as the child's family meets, or can be helped to meet, the minimum sufficient level of care required for the safety of that child. As already discussed, a minimum sufficient level of care (MSLC) means that all basic needs are met and the child is not harmed physically, sexually, or emotionally. The state intervenes when basic needs are not met—not when a family is unable or unwilling to provide an optimal level of care.

In considering what the minimum sufficient level of care is for any one child, it is important to remember the key parameters of this standard:

1. It relates to a particular child.
2. It is a set of minimum conditions, not an ideal situation.
3. It is a relative standard, depending on the child's needs, social standards, and community standards. It will not be the same for every family or every child in a particular family.
4. It remains the same when considering reunification as when considering removal.

This standard for families is often difficult for Advocates to embrace. It feels counterintuitive, as though it defies common sense. You may be tempted to ask, "Wouldn't any child be better off in a family without the limitations that are present in this situation?" The truth is that most would not. The overwhelming sense of loss that children suffer when removed from their homes—loss of love, of security, of the familiar, of their heritage, of control in their lives; feelings of worthlessness; and the almost unendurable pain of separation—is terribly painful for most children. Despite the bad things that have happened in their lives, most children in the system love their families and want desperately to be reunited with them.

FACILITATOR NOTES**Module 5: MSLC, Advocacy and Sense of Family Continued****CONNECTIONS ACTIVITY Instructions Continued from previous page**

“We have received feedback from Advocates that this is one of the most meaningful activities we do. It may be outside of your comfort zone, but I think we’ve been together long enough for you to trust me and each other.”

- “Don’t write down anything until you have all the instructions; put your manuals off to the side.”
- “On each of the 5 post-its write one of the 5 most important things in your life; connections you have with the world/universe. What things, if taken away, would stop you from functioning as the whole, complete, loving person you are today/ what would change who you are sitting here today? These can be talents, hobbies, relationships, skills, careers, or anything else. Don’t write individual’s names on each post-it, but group people together, such as “family” or “immediate family”, “friends.”
- “I’m going to ask that you be respectful of one another’s connections – we can’t judge what is important to others.”
- After it is quiet and all have finished writing, ask them to put pens down.
- Ask 1-2 people to share all 5 connections.
- Next, state: “I am a powerful person and have influence over your life. I need for you to disconnect from one of them; the way to do that is to lay it on the floor.” Ask each to say what they gave up.
- “I need for you to give up another connection.” Ask each to share; starting with a different person.
- “But you still have 3 connections left. I need for you to let go of another.” Share.
- With the last 2 connections make a judgment. Ask them to let go of one and then share what they gave up and what they kept. – They will share with the group: “I would give up _____ (and they choose one) to keep _____ (whichever they choose to keep). They decide based on where their thoughts at today at this time.
- Share around the group and pause. Let them pick up their connections.
- **Debrief: How to Process the activity:**
 - What similarities do you see between this and the kids who go into foster care? Kids don’t get to choose, and we can’t say what is important to them. Foster children lose their family, which is usually what most people decide to give up last.
 - It’s no wonder parents often react the way they do: I would fight tooth and nail to keep my kids.
 - Point out that it may have been difficult for them to put the post-it’s on the floor, but they were just pieces of paper.
 - Remind them that this idea needs to be kept in the forefront of their mind while working with the family and children and when advocating for permanency outlining recommendations.
 - Consider the Myers family: Are there any parent actions/responses or child behaviors/statements that might be related to their grief and loss of potentially losing their family?
 - *(There are not perfect answers that we are looking for here. Its wherever the training as brought them, and this is intended to be a self-reflection type of questions)*

If parenting hovers at the minimum sufficient level of care, the child protective services system and the court likely will not get involved. If the child's basic needs are not being met and/or the child is being abused, the child protective services system steps in. Once the system has intervened, the responsibilities of the parent (e.g., to seek substance abuse treatment or learn parenting skills) and those of the child protective services agency (e.g., to provide visitation, arrange counseling, etc.) are spelled out in agreements that are enforced by court orders.

Ideally, these agreements will help the parent move at least to a minimum sufficient level of care. The steps in these agreements with parents need to be small and measurable. Appropriate resources need to be available to support changes that the parent makes. If the steps are too big or complex, the parent may give up, causing the family situation to deteriorate and the child to lose the chance to ever return home. If the steps are not measurable, success cannot be determined.

For example, a parent can "attend parenting classes" for six months without ever making a change in behavior. If the agreement specifies that the parents are "able to describe and apply five ways to discipline their child without spanking," both the parents and any observer will be able to tell whether the task gets accomplished.

As an Advocate, you should routinely ask the question of parents and DHS case managers:

- "How will you know when this requirement is met?" and
- "What will it look like when the family has demonstrated success and a child can be returned home?"



FACILITATOR NOTES**Module 5: Wrap up and Evaluation**

Equipment/Supplies

- Slide: *Why Permanency is Critical – Video: Multiple Transitions*
 - Slide: *Wrap Up and Evaluations*
 - Evaluations
-

What you should know

- Advocates will have additional opportunities to have their questions answered as they practice writing their CASA Court report during the Module 6 in person training session.
 - The local coordinator will be facilitating the session of Module 6.
-

What to say/do

- **CUE SLIDE.** *Why Permanency is Critical – Video: Multiple Transitions.*
- Debrief video by asking participants for their thoughts. (There are no “correct” statements that need to be made here.)
- Ask for any final questions.

- **CUE SLIDE.** *Wrap Up and Evaluations*
- Read the Starfish Poem
- Thank Advocates for their participation.



FACILITATOR NOTES

Module 5: Module 5 Evaluation

Equipment/Supplies

- Bring extra Evaluations in case a participant makes an error and wants a new sheet.
-

What to say/do

- Ask participants to complete the Module 5 evaluation.
- Give instructions where to place their evaluations before they leave the room.
- Provide information about what comes next – any plans for Module 6 will come from their local coordinators.
- Thanks again.

Evaluation Module 5

Please complete this evaluation of the fifth pre-service training module. Did you learn what was intended? (6 is high and 1 is low)

Learning Outcomes	Ratings					
	6	5	4	3	2	1
1. Describe how the child welfare system uses family strengths and resources to build upon when addressing issues						
2. Identify and analyze my own values and recognize the need to be objective.						
3. Recognize how major factors that impact family culture are risk factors for children, for abuse and neglect of children.						
4. Develop a plan to gather information on a case.						
5. Practice outlining key features of family and individual strengths, case concerns, and recommendations for preliminary CASA Report to the Court.						
6. The content of this session was						
7. The notebook materials were						
8. The activities were						
9. The facilitator was						
10. Overall, I rate this session						

10. What was the most valuable to you?

11. Is there anything we could improve or do differently?

Name _____ Date _____

Thank you for your participation and feedback!